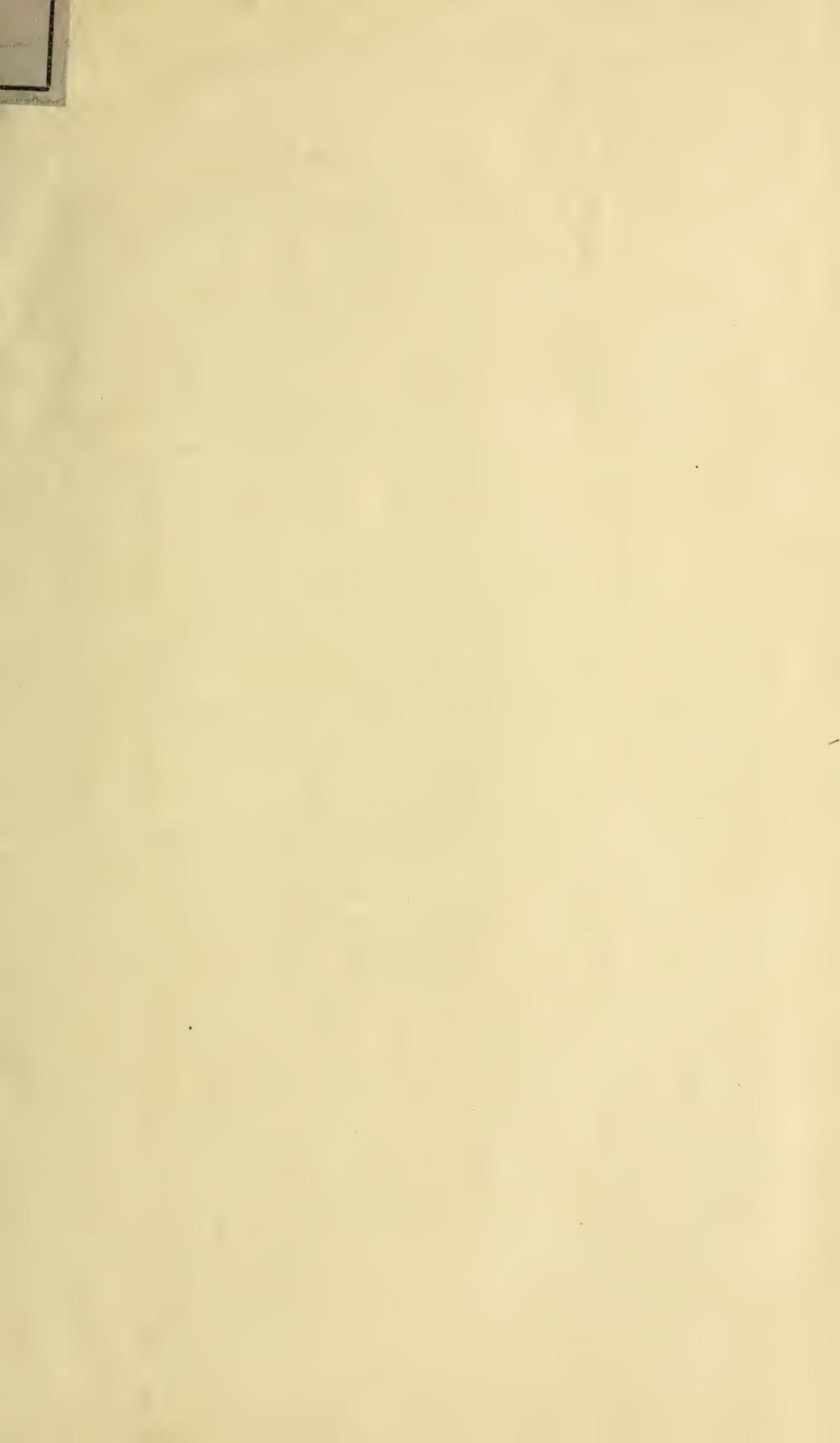


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The Commonwealth of Massachusetts

ANNUAL REPORT

OF

THE TRUSTEES

OF THE

WORCESTER STATE HOSPITAL

FOR THE

YEAR ENDING NOVEMBER 30, 1921

DEPARTMENT OF MENTAL DISEASES



BOSTON

WRIGHT & POTTER PRINTING CO., STATE PRINTERS
32 DERNE STREET

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C O N T E N T S .

	PAGE
REPORT OF THE TRUSTEES	7
REPORT OF THE SUPERINTENDENT	11
VALUATION	38
REPORT OF THE TREASURER	39
STATEMENT OF FUNDS	46
STATISTICS	49

OFFICERS OF THE WORCESTER STATE HOSPITAL.

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CLARENCE A. BONNER, M.D.	<i>Assistant Superintendent.</i>
— — —	<i>Director Clinical Psychiatry.</i>
MICHAEL J. O'MEARA, M.D.	<i>Senior Assistant Physician.</i>
LEON E. DUVAL, M.D.	<i>Senior Assistant Physician.</i>
— — —	<i>Senior Assistant Physician.</i>
— — —	<i>Senior Assistant Physician</i> (<i>Pathologist</i>).
ROBERT B. HARRIMAN, M.D.	<i>Assistant Physician.</i>
GEORGE F. CALDICOTT, M.D.	<i>Assistant Physician.</i>
FRANKLYN P. BOUSQUET, M.D.	<i>Assistant Physician.</i>
GEORGE A. GAUNT, M.D.	<i>Assistant Physician.</i>
HARRISON M. STEWART, M.D.	<i>Assistant Physician.</i>
— — —	<i>Assistant Physician.</i>
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JAMES DICKISON, Jr.	<i>Chief Engineer.</i>
ANTON SWENSON	<i>Foreman Mechanic.</i>

The Commonwealth of Massachusetts

TRUSTEES' REPORT.

To His Excellency the Governor and the Honorable Council.

The trustees of the Worcester State Hospital respectfully submit the eighty-ninth annual report of the hospital, appending a record of the various departments as reported by the superintendent, Dr. William A. Bryan, and by the treasurer, Jessie M. D. Hamilton.

In November, 1920, Mr. Edward F. Fletcher of Worcester was duly elected permanent chairman of the Board, and Miss Caroline M. Caswell, secretary.

The trustees assisted in helping to make the American Medico-Psychological Association meeting in Boston the success which it was.

In their corporate capacity the trustees voted to present Washington Allston's picture of St. Peter and the Angel in Prison, given to the hospital by Dr. R. W. Hooper, to the Boston Museum of Fine Arts on condition that the original be replaced by a very fine copy. This gift was made after careful consideration of the terms of the deed of gift from Dr. Hooper, and in view of the fact that the original would be of far greater value as an art treasure to the Art Museum than to the hospital, while a good copy would give as much pleasure to the inmates of the Worcester State Hospital.

Believing in co-operation the Board voted to place a sign of welcome to the city at the junction of Lake Avenue and Belmont Street, at the request of the Chamber of Commerce, and also voted to grant the city of Worcester permission to erect a memorial granite shaft for James M. Beatty on the north-easterly corner of Beatty Square.

Still thinking, as outlined in the 1920 report, that there

ought to be something definite for all trustees to do to further the work with which they had become associated, they voted to give hearty support to the Hospital Trustees Association for a year. The association has been invited to hold its spring meeting at the hospital.

One new plan which has worked out very satisfactorily is the presenting of a full typewritten report by the superintendent to the trustees several days before the monthly meetings. This report is most comprehensive and gives the trustees time to consider the various phases of the work in an intelligent manner.

Repairs on the organ were voted from the private funds held by the trustees.

The details of improvements in the hospital will be noted by the superintendent, but the trustees gladly report improved conditions and steps in advance everywhere. Buildings painted, installation of new toilets on Washburn I and II, work begun on the renovation of Lincoln IV and Salisbury III, a new system of handling garbage, the purchase of necessary home, farm, medical and dental equipment, the grading and terracing of the land, and the laying of water pipes at Hillside — all these activities pointing to progression.

Attention is called to the careful analysis made in the summary of admissions in the superintendent's report, and to the result of treatments which, after all, is the most important feature; also to the resident dentist's report of the dental department, which shows a very decided increase in work accomplished. The excellent achievements in the pharmacy should be especially noted, showing as they do in the pharmacist marked thought and interest in the work and capacity for service. The social service department is as ever important in its results and in its bearing upon our usefulness in the community. An assistant has been at work in this branch since September 18. The course of six lectures for the social workers of Worcester in psychiatric social service, which lectures have been largely attended and thoroughly appreciated, is also a forward step in the community's understanding of hospital service, as well as of much educational value to the social worker. The out-patient department offers

many of the advantages of a psychopathic to the people of Worcester and vicinity, and will be a most important factor in acquainting those outside the hospital with its desire for helpfulness. The results of this new work have been most encouraging.

The trustees respectfully submit the fact that there is imperative need of fireproof stairways; that a new storehouse and a new system of refrigeration are both very desirable; and that a plan for a congregate dining room should be made. The use of the Summer Street department for an up-to-date pscyho-pathic hospital would greatly increase the value of the Worcester State Hospital in this section of our State. The trustees again urge upon those in power the necessity of increasing instead of decreasing salaries and wages for workers in the different departments, in order that the best brains and service may be obtained for the hospital.

The trustees can point with no little pride to the advance which the hospital has made during the past year under the leadership of Dr. Bryan, appointed superintendent in March, 1921. His keen mentality, united with his love for humanity, his common sense backed by willingness to work, his vision and command of others, are qualifications which will make the Worcester State Hospital most progressive. In all his plans he has the endorsement and co-operation of the trustees, and the improvements in the hospital in all its departments are already perceived. It is most fitting that this, the oldest hospital in Massachusetts, known in the early days for the heartlessness which characterized the care of the insane, should now become noted for the incorporation in its remedial work of the best and most advanced ideas. The improvements in the wards, making them altogether more desirable, the dining rooms and sitting rooms planned with a thought of home in mind, the admission offices designed to impress the patient favorably, the salvage yard arranged to save all left overs and to provide proper storage for such goods, the reorganized store system, the labor-saving devices, which enable Dr. Bryan to know just what each department is doing and just how many employees are at their posts — these and various other advanced steps point to better service and more satisfactory results. The

clinic at the Summer Street department attended by patients recommended by doctors, social workers and the schools, the advice tending toward future amelioration of defects thus discovered, and the schoolroom where those with proper capacity can be taught and thus increase the possibility of cure, are features of the progressive plans now being made and in which the trustees rejoice. People and what he can do for them shape all Dr. Bryan's plans. The Christmas trees in every ward, that those unable to leave the ward should also have some of the joys of this glad season, the diversified entertainments, the careful plans for every one's happiness, show the heart in the work, the desire to help, the hope that good may come to the patients,—the patients who are the first and last thought of Dr. Bryan and his able assistant, Dr. Clarence A. Bonner, also a new appointee at the hospital.

The trustees would be remiss if in this report they did not thank all the employees of the hospital for the admirable way in which they have co-operated with Dr. Bryan in the many changes he has made, and for the spirit of good fellowship which exists. Such co-operation with such an able leader can but make for a most successful new year of service.

Respectfully submitted,

EDWARD F. FLETCHER.

JOHN E. WHITE.

JOHN G. PERMAN.

LUTHER C. GREENLEAF.

CAROLINE M. CASWELL.

MAE CARLSON BEMIS.

WILLIAM J. DELEHANTY.

SUPERINTENDENT'S REPORT.

To the Trustees of the Worcester State Hospital.

I herewith respectfully submit the following report of the hospital for the year ending Nov. 30, 1921, it being the eighty-ninth annual report.

There remained on the hospital books Oct. 1, 1920, 2,271 patients,—1,172 men and 1,099 women. During the year ending Sept. 30, 1921, there were admitted 616 patients,—382 men and 234 women. Five hundred and twenty patients—314 men and 260 women—were discharged from the hospital. Of this number, 265 patients—166 men and 99 women—were discharged; 241 patients—138 men and 103 women—died; and 14 patients—10 men and 4 women—were transferred, leaving at the end of the statistical year 2,367 patients,—1,240 men and 1,127 women. Two thousand and fifty-eight patients—1,048 men and 1,010 women—were actually in the hospital. Of this number, 1,852 were supported by the State, 102 by friends, and 104 as reimbursing patients. Of the patients discharged, 57 were reported as recovered, 157 as improved, and 33 as not improved. Eighteen patients—12 men and 6 women—were discharged as not insane. Seven men and 2 women were transferred by the Department of Mental Diseases to the State Infirmary; 2 women to Herbert Hall; 2 men to the Medfield State Hospital; 1 man to the Boston State Hospital. Ten men and 4 women were removed from the State and 15 men and 3 women were deported.

There remained in the hospital at the end of the year 95 more patients than at the beginning. The smallest number under treatment on any day was 1,976 patients, and the largest 2,084. The daily average was 1,990.62.

The percentage of recoveries calculated upon the number of discharges and deaths was 8.87, calculated upon the number of admissions, 10.63. The death rate was 11.9, calculated on the whole number of patients under treatment, and 8.2 calculated on the daily average number.

ADMISSIONS CLASSIFIED BY CLINICAL GROUPS.

The classification adopted by the American Psychiatric Association has been followed, and the following summary of admissions, according to clinical diagnosis, with a brief analysis of each group, is submitted.

This summary was prepared by Dr. Clarence A. Bonner, assistant superintendent, Dr. Franklin P. Bousquet, assistant physician, and Miss Harriet L. Card, superintendent's clerk.

Traumatic Psychosis.

Number of cases admitted, one.

Following is a brief abstract of the same:—

Patient is a white male, age 50, single, and a laborer by occupation. Born in Winchendon, Mass. Admitted to this hospital July 13, 1921, on regular papers.

Family History.—Negative.

Personal History.—Early childhood essentially negative. Attended school until he reached the second year of high school, and at sixteen he went to work.

Onset.—Sudden. He thought that women entered his room at night, and that they were attempting to persecute him by various methods.

Physical Examination.—Shows ptosis of right upper lid, pupils sluggish in action. Wrist shows a condition resembling wrist drop. Blood pressure, 112 systolic, 70 diastolic. Urinalysis and Wassermann negative.

The injury to his head is said to have occurred when he fell from a high wall while spraying trees with a chemical. Apparently after this there was a progressive weakening of the muscles and the formation of a psychosis.

Senile Dementia.

Number of cases admitted, 47,—17 males and 30 females.

Types.—Simple, 30; presbyophrenic, 1; paranoid, 16; total, 47. Average age, seventy-two years.

Results of Treatment.

	Males.	Females.	Totals.
Discharged improved	-	-	-
Discharged unimproved	-	-	-
Died	-	-	-
Remaining in hospital	17	30	47

Cerebral Arteriosclerosis.

Number of cases admitted, 46,— 31 males and 15 females,— equal to 5 per cent of the total admissions; fifth decade, 9; sixth decade, 12; seventh decade, 16; eighth decade, 9.

General Paralysis.

Number of cases admitted, 34,— males, 27, and females, 7,— or 7 per cent of the total admissions. Average age of men on admission, fifty years; of women, forty-two. Youngest patient in this group is twenty-two years of age, and the oldest was sixty-four.

Twelve patients died, a mortality of 33 per cent.

Results of Treatment.

	Males.	Females.	Totals.
Discharged improved	1	-	1
Discharged unimproved	-	-	-
Died	11	1	12
Remaining in hospital	15	6	21

Cerebrospinal Syphilis.

Under this classification we have gathered 8 cases which represent an involvement of the nervous system, varying in degree but exclusive of general paresis. Of these cases 4 have left the institution and 2 are remaining in the hospital. Both of the females have been permitted to leave. One of the male cases responded remarkably well to intensive treatment. This patient upon entrance exhibited a paralysis of the right arm and an aphonia. At the time of his leaving the institution muscular sense was apparently improved to such an extent that the patient could readily move his fingers. He also recovered his speech to the point where he was able to make himself understood. This case is one of the few which stand out as convincing evidence of the advisability of intensive treatment of neurosyphilitics, including the paretics.

Huntington's Chorea.

During the year 1 case was admitted. A brief abstract on this case is as follows:—

The case of A. N., admitted to the hospital May 10, 1921. As usual in these cases we have a previous record of an ancestral case. The father was a patient in this institution. The patient is fifty-four years of age. Received a common school education. Has four children and general health has been fairly good. In October, 1921, patient began to show unusual signs of nervousness,—became irritable, suspicious, careless in her habits, and the typical movements associated with Huntington's chorea became evident. Neurological findings: vision very much impaired; protrusion of the right eyeball; general choreic movements, with a certain amount of voluntary control. Blood pressure: 200 systolic, 110 diastolic. The blood serum was negative.

Hospital history finds that patient has been very kindly disposed, pleasant and tractable; somewhat sensitive, neat in habits and has assisted greatly in the care of herself. Mentally she is extremely emotional—exaggerates her troubles; occasionally makes rather unreasonable complaints, but, on the whole, has adopted a rather contented manner, and is getting along very comfortably at the present time.

Psychosis with Other Brain or Nervous Diseases.

Four cases were admitted: cerebral embolism, 1; paralysis agitans, 1; encephalitis, 2.

Results of Treatment.

	Males.	Females.	Totals.
Discharged improved	-	-	-
Died	-	2	2
Remaining in hospital	2	-	2

Alcoholic Psychosis.

Twenty-one cases were admitted, equal to 1 per cent of the total admissions. Of the total admissions, 2 were discharged recovered, 1 improved, 1 died and 17 remain in the hospital.

The general run of alcoholic cases shows little change from

that of previous years excepting in numbers. There are 7 more alcoholic cases this year than last. In detail, there was 1 case of pathological intoxication, 1 case of delirium tremens, 2 cases of Korsakoff's psychosis, 10 cases of acute alcoholic hallucinosis, 3 cases of chronic hallucinosis, 1 of the chronic paranoid type, and 3 alcoholic deteriorations.

Psychoses due to Drugs.

Psychoses due to drugs came under treatment in 2 cases; 1 was morphine and 1 cocaine. Of this group, 1 escaped from the hospital and the other is in the institution.

Psychosis with Other Somatic Diseases.

During the year 7 cases were admitted in whom the etiological factor was some physical condition,—post-infectious psychosis, 1 male, 3 females, total, 4; exhaustion delirium, 3 females.

These cases are interesting and unusual, for the reason that very definite physical disease is allied with the mental condition. The symptoms are similar to the usual psychoses, but the basic cause has been attributed to the physical state.

Of these cases above mentioned, 2 directly followed parturition, and 1 followed peritonsillar abscess with resultant absorption of toxins. One was associated with pulmonary tuberculosis, 2 followed periods of exhaustion, and 1 followed chronic nephritis.

Results of Treatment.

	Males.	Females.	Totals.
Discharged recovered	-	1	1
Discharged improved	-	-	-
Discharged unimproved	-	-	-
Died	-	-	-
In hospital	1	5	6

Manic-depressive Psychosis.

During the year 32 cases were admitted,—14 men and 18 women,—equal to 8 per cent of the total admissions for the year.

SUBCLASSIFICATION.	Males.	Females.	Totals.
Manic type	3	14	17
Depressed	10	3	13
Mixed	1	1	2

Results of Treatment.

	Males.	Females.	Totals.
Discharged recovered	4	-	4
Discharged improved	1	3	4
Discharged not improved	-	-	-
Died	2	2	4
In the hospital	7	13	20
	14	18	32

Involutorial Melancholia.

During the year 28 cases were admitted,—14 men and 14 women,—comprising 9 per cent of the total admissions.

Results of Treatment.

	Males.	Females.	Totals.
Discharged improved	1	-	1
Discharged recovered	1	-	1
Remaining in the hospital	12	14	26
	14	14	28

Dementia Praecox.

Out of 240 cases admitted, 141 were dementia praecox cases.

There were 97 males and 44 females, comprising 56 per cent of the total admissions.

SUBCLASSIFICATION.	Males.	Females.	Totals.
Paranoid	61	25	86
Catatonic	17	13	30
Hebephrenic	10	2	12
Simple	9	4	13
	97	44	141

Results of Treatment.

.	Males.	Females.	Totals.
Improved	7	2	9
Not improved	1	-	1
Died	2	2	4
Remaining on books	87	40	127
	97	44	141

Epileptic Psychosis.

This group is comprised of 4 cases, — 2 men and 2 women, — all of whom were placed in a subgrouping of deterioration. The family history could not be obtained in 2 cases. One case was positive to insanity, the other case was negative.

Results of Treatment.

	Males.	Females.	Totals.
Discharged improved	-	-	-
Discharged not improved	-	1	1
Died	1	-	1
Remaining in hospital	1	1	2
	2	2	4

Psychoneuroses and Neuroses.

The total number of psychoneuroses cases admitted was 10, — 3 men and 7 women.

Types. — Hysterical types, 4; psychasthenic, 3; neurosthenic, 3.

One was discharged not improved, 3 improved, no deaths, and 6 remain in the hospital.

Psychopathic Personality with Psychoses.

There were 2 cases diagnosed in this group. These were both first admissions. One of these was married and the other single; one a laborer, and the other's occupation was given as civil engineer. One of these cases remained in the hospital but a month, when he was permitted to leave on visit. The other during his stay showed a gradual increase in psychotic symptoms.

Psychosis with Mental Deficiency.

Of the total admitted there were 21 cases classified in this group,—14 men and 7 women; the average age was forty years, the youngest fourteen and the oldest sixty years. Discharged as improved, none; not improved, 2; remaining in the hospital, 19.

Undiagnosed Psychosis.

Thirty-six cases were admitted during the past year. These included 22 men and 14 women. Four cases were discharged as improved, 1 not improved, 3 died, and there are 28 remaining in the hospital.

This group of cases at the time of staff presentation could not be placed in any definite classification according to the schedule. In the majority of these cases the history was not of any great help. A few of the cases were incomplete because of the patient leaving within a few days after admission, not giving opportunity for the proper study and observation. From time to time throughout the year it is planned to inspect and re-examine cases of this kind, expecting that the symptomatology will offer evidence of a recognized psychosis. Of these 36 cases but 4 had a positive Wassermann and but 1 showed any symptoms of neurosyphilis.

Without Psychosis.

Six cases were admitted wherein no psychosis could be found. Of these, 4 were men and 2 women. There was 1 epileptic, 4 psychopathic personalities, and 1 mentally deficient. Of this group 2 men have been discharged and 4 remain in the hospital.

At the time these cases were presented at staff meeting their conduct and general reactions had given us no clew as to the actual type of mental disease. In all the cases there had been certain abnormal activities which had served to bring them within the view of the authorities. It not infrequently happens that patients who have perpetrated conduct disorders are of the constitutional inferiority or psychopathic classes, who are capable of self-restraint under disciplinary measures, but who do not exhibit those gross signs or symptoms which enable us to properly diagnose according to the present classification. Of this group the psychopathic personalities predominated, with 1 case of mental deficiency and 1 of epilepsy with infrequent convulsive episodes.

Ex-Service Men.

During the past year there were 47 ex-service men admitted to this hospital, and 15 of that number remained at the end of the year, making a total of 43 soldiers in the institution. Of those leaving the hospital 10 are out on a year's trial visit; 7 left without permission; 1 was transferred to another State hospital; 3 were discharged as recovered, 6 as improved, 4 as not improved, and 1 as not insane.

These men have been in charge of a special attendant who is himself a veteran, and the results of this plan have been most gratifying.

The following table shows the psychoses of these patients:—

Dementia præcox	26
Alcoholic	5
Manic-depressive	3
Psychopathic personality	3
Mentally deficient	2
Psychoneuroses	1
Epileptic	1
General paralysis	1
Cerebral embolism	1
Unclassified	2
Not insane	2

GENERAL HEALTH OF THE POPULATION.

The general health of the institution has been good. Among the employees 2 nurses suffered from diphtheria and were cared for at the Isolation Hospital. One female patient, suffering from dementia praecox, died from fracture of right femur, having been pushed by another patient. One woman suffering from cerebral arteriosclerosis died from multiple injuries, due to an accidental fall. One woman, also a case of cerebral arteriosclerosis, died from asphyxiation, due to food in larynx and bronchi. One man, diagnosed general paralysis of the insane, died from punctured ribs, due to an accidental fall from bed.

These cases were investigated by the medical examiner, and Dr. Myrtelle M. Canavan of the Department of Mental Diseases.

PRINCIPAL CAUSES OF DEATHS.

Seventeen and one-half per cent of all deaths were due to general paralysis of the insane; 15 per cent each to cardiovascular renal disease and pneumonia; 10 per cent to general arteriosclerosis; and $7\frac{1}{2}$ per cent to cerebral hemorrhage.

STAFF CHANGES.

The following changes have taken place on the medical staff of the hospital:—

Resignations.

William J. Vivian, M.D., resigned Jan. 21, 1921, to go to the United States Public Health Hospital, West Roxbury, Mass.

Donald R. Gilfillan, M.D., resigned to go to the National Sanatorium, Marion, Ind., Jan. 27, 1921.

B. Henry Mason, M.D., acting superintendent, left to accept a position at the Psychopathic Hospital, Ann Arbor, Mich., April 17, 1921.

Roy C. Jackson, M.D., resigned July 1, 1921.

Arthur H. Mountford, M.D., resigned Aug. 31, 1921.

Ada F. Harris, M.D., resigned Aug. 31, 1921, to be married.

Appointments.

William A. Bryan, M.D., was appointed superintendent, and assumed charge April 3, 1921.

George F. Caldicott, M.D., was appointed assistant physician June 1, 1921.

Franklyn P. Bousquet, M.D., was appointed assistant physician June 1, 1921.

George A. Gaunt, M.D., was appointed assistant physician Aug. 1, 1921.

Harrison M. Stewart, M.D., was appointed assistant physician Oct. 3, 1921.

Leon E. Duval, M.D., was appointed senior assistant physician Jan. 1, 1922.

Dr. Clarence A. Bonner was made assistant superintendent Sept. 13, 1921.

Dr. Michael J. O'Meara was made senior assistant physician Nov. 23, 1921.

Dr. Lloyd E. Byrd was appointed resident dentist Aug. 15, 1921.

STUDENT INTERNES.

The staff was materially assisted in the work during the summer months by a number of student internes from the Women's Medical College, Philadelphia, the University of Michigan Medical College, and the Tufts Medical College. One dental interne from Harvard Dental School served three months in the dental department. These positions are filled by second and third year students, and their work consists of acting as aids to the medical staff in the examination and treatment of patients, and as assistants in the pathological laboratory.

It is our intention to give the students a definite formal course of instruction along specialized lines, and such course is now being prepared for the next group of internes who come to the hospital.

The following students served as internes for periods of two to three months:—

Carl P. Benaglia	June 1 to Sept. 1, 1921.
Fernand M. Riendeau	June 9 to Aug. 1, 1921.
Edward P. A. Vercueil (dental)	June 10 to Sept. 10, 1921.
Henry L. Smith	June 22 to Sept. 12, 1921.
Walter O. Klingman	June 22 to Sept. 10, 1921.
Mildred Rogers	June 30 to Aug. 30, 1921.
Matilda Maerz	July 3 to Sept. 16, 1921.
Emily Gardner	July 3 to Aug. 30, 1921.

MEDICAL WORK.

The established routine of immediate preliminary physical examination of all newly admitted cases, Wassermann tests, typhoid and smallpox vaccines has been followed. Each case admitted for ten days' observation is brought to the staff conference where the question of commitment is decided. Staff meetings are held daily at 8 o'clock, each member of the staff being assigned a definite day when his cases may be presented. No case is presented until history, physical and mental examination and all special tests are secured, diagnosis made and a course of treatment outlined.

The general health of the population has been good during the year. Two cases of diphtheria have occurred, both of them being in the nursing group. They were sent to the City Isolation Hospital; both made a good recovery.

The X-ray department has been in active operation most of the year. There has been a total of 55 skiagraphs made from September 1 to the close of the year. The pictures taken are classified as follows:—

Hip	2	Shoulders	4
Wrist	10	Chest	6
Foot	1	Hand	11
Head	3	Ankle	9
Knee	6	Spine	3

The following lesions were found in this group of cases:—

Colle's fracture of wrist.

Compound fracture of humerus above an old fracture.

Compound comminuted fracture of right radius and ulnar bones.

Osteoma pereostitis of left tibia.
Falling of ant. arch of right foot.
Fracture of middle third of right humerus.
Dislocation of acromial end of right clavicle.
Double fracture of lower one-third of ulnar.
Three positive cases of tuberculosis.

We have made increased use of electrotherapeutics in treating certain types of psychoses, and the success attending this work deserves its further expansion.

HYDROTHERAPY.

A complete reorganization of the hydrotherapy department has been brought about in the past year. Considerable new equipment, such as pack beds, has been added. Largely as a result of the increased use of this method of treatment, restraint and seclusion have been practically eliminated from the hospital.

CALISTHENICS, RE-EDUCATIONAL WORK AND HABIT TRAINING.

The scope of the re-educational work has been enlarged. The sale of articles turned out by this department has been abolished, and the products are now used entirely by the hospital. This has the effect of transferring the interest of the instructors to the patient. The therapeutic idea is kept in view, and the instructor is interested in the improvement of the patient rather than the attempt to turn out beautiful articles for display or sale.

A beginning has been made in grading the classes according to the occupation being taught, progressing from the simple to the complex, and each type of occupation is in a separate room. In this way the progress of the patient can be accurately followed. A class of demented patients has been organized under a physical culture teacher. Small groups of patients are taken to the chapel and an hour spent in playing games, in various calisthenic exercises and in marching. We have found that this is the longest period of time such work can be profitably followed for the same patient, and a different group is

treated each hour of the day. In this way one teacher can give her attention to a very large group of patients.

Habit-training classes have been inaugurated on the untidy wards, and have done much to raise the morale of the patient population on these wards. Three school classes have been organized, with patients officiating as teachers,—one class in English for young Italian girls, a class in conversational French, and a class in the elementary branches. These classes have been productive of excellent results, and pupils and teachers have shown much improvement as a result of them.

An occupational therapy department has been started at Summer Street, and this work has been enlarged until it is a very prominent factor in the work of that department.

Staff Luncheons.

A new feature has been initiated during the past year which has been of much interest and benefit to the members of the staff. Once in two weeks a staff luncheon is held, at which time a specialist is secured in some field of general medicine who discusses with the members the particular phase in which he is interested. These meetings have been unusually helpful and stimulating. We are indebted to the following speakers for their helpful talks:—

Dr. Michael Jordan, "The Relation of the State Hospital to the Neurologist."

Dr. Ernest Hunt, "Surgical Organization."

Dr. Walter Bieberbach, "Surgery of the Prostate Glands."

Dr. Thomas F. Kenney, "The Relation of the Board of Health to the State Hospital."

Dr. James Plant, "A Plan for Nurses' Notes."

On December 7 the fifty-second meeting of the assistant physicians of the State hospitals of Massachusetts was held here. The program consisted of a ward inspection in the morning, luncheon at 1 p.m., physicians' meeting at 2, followed by literary papers and discussion, led by Drs. Bonner and Gaunt. Calisthenic exercises and occupational activities were demonstrated.

LABORATORY REPORT.

The work in the pathological laboratory suffered very seriously by the resignation of Dr. Ada Harris. Since that time we have had no pathologist in charge, and have only been able to do the routine work. A pathologist has been secured and will begin his duties on February 1, at which time it is expected that a complete reorganization of the pathological work will take place and the next year be one of productive activity.

DENTAL DEPARTMENT.

The following report is submitted by Dr. Byrd, the resident dentist: —

I submit herewith the following report of the dental work done at the hospital during the year 1921. A full-time dentist was appointed in June, 1921, and the report will show the increase in the amount of work carried on following this appointment.

For the months of June, July, August, September, October and November the least number of patients treated was 193 and the greatest number was 267. The least number of prophylactics was 87, the highest 161. The least number of fillings was 52 and 187 the highest. Treatments throughout this period ranged from 11 per month up to 27. The greatest number of extractions were performed in November, there being 462.

A full equipment for the dental laboratory has been installed and four plates have been completed for patients in the hospital. The work of Miss Thompson, dental hygienist, has been extremely valuable. She has done much prophylactic work, and in addition has inaugurated classes in hygiene on the wards. Attention should be called to the necessity of the new work with accessories for the use of the dental hygienist, and also a new dental cabinet and nitrous-oxide machine. The following table shows, in detail, the work done in the department: —

MONTH.	Number of Patients.	Cleaning.	Filling.	Plates.	Treatment.	Teeth extracted.	Impacted Teeth extracted.	Plates repaired.
December	32	4	9	-	4	33	-	-
January	48	15	6	-	3	61	-	-
February	36	3	14	-	8	34	-	-
March	59	12	24	-	12	51	-	-
April	39	6	9	-	5	37	-	-
May	27	7	8	-	10	12	-	-
June	193	115	52	-	23	299	-	-
July	235	112	82	-	18	390	-	-
August	267	102	156	-	26	434	3	-
September	250	137	117	-	27	350	2	-
October	262	87	187	1	24	333	3	-
November	256	161	163	3	11	462	4	1
Totals	1,704	761	837	4	171	2,496	12	1

REPORT OF THE OUT-PATIENT DEPARTMENT.

The following report of the work of the out-patient department which was begun at the Summer Street Department in June, 1921, is submitted by Dr. George F. Caldicott, who has acted as the head of this phase of the work and has also had charge of the examination of school children. The personnel consisted of Dr. Caldicott and Dr. Michael J. O'Meara, Miss Helen A. Martin, psychologist, Miss Mary W. Howgate and Miss Jennie A. Harrington, social service workers, Miss Margaret Medcalfe and Miss Mary Donohue, nurses.

I herewith submit the summary of the work done in the out-patient department during seven months of the year 1921. This department was organized in June, the purpose of the clinic being to offer to the people of this section of the State the advantages of a psychopathic hospital. At first the idea was somewhat new to the public, but the opportunity for help offered by the clinic was soon recognized. Before long, not only were psychiatric cases presented for diagnosis, treatment and advice, but also neurological and syphilitic cases; also cases of children who were retarded in school or who were conduct problems. Later the task of examination of school chil-

dren in 58 towns came to be placed under this department. The clinic has available physicians, social workers, a psychologist and nurses — all training along this line of work. The routine of examination consists of searching inquiry along lines of physical examination, family history, personal and developmental history, school progress and tests, practical knowledge, economic efficiency, social history and reactions, moral reactions, mental and psychological tests; also the routine taking of blood for Wassermann tests, together with laboratory examinations, as indicated.

If needed, such facilities as X-ray, electrical apparatus and fluoroscopes are available for detailed study. From this data a complete and composite picture is made from which to draw a conclusive diagnosis. A diagnosis being made, advice on the disposition of the case is given, and patients who can receive treatment at the hospital are given attention free of charge.

The following table will show the type of cases handled by the out-patient department: —

DIAGNOSIS.	No.	Recommendations.	Disposal.
<i>I. Psychotic.</i>			
Dementia præcox . . .	1	Hospitalization . . .	Committed to Worcester State Hospital.
Senile dementia . . .	1	Sanatorium treatment . . .	Relatives carrying out advice.
Manic-depressive . . .	2	Hospitalization . . .	Committed to Worcester State Hospital.
Psychosis with cerebral embolism.	1	Hospitalization . . .	Temporary care at Adams Nervine by relatives; later committed to Worcester State Hospital. Condition unimproved.
Neurosis . . .	3	Electro and hydrotherapeutic treatments, with psychoanalysis.	Treatment carried on at Worcester State Hospital out-patient department. Improvement seen.
Neurasthenia . . .	2	1, electro and hydrotherapeutic treatment. 2, readmission to hospital . . .	1, carried on at Worcester State Hospital out-patient department. 2, in hospital. Condition improved.
<i>II. Feeble-minded.</i>			
Simple . . .	9	1, institutional care . . . 5, special class and manual training. 2, corrective supervision (at home). 3, institutional care . . .	Admission pending. In hands of relatives. Being carried out. Advice not followed.
Delinquent . . .	6	Institutional care . . .	4, admitted to feeble-minded school. 2, admission pending.
With syphilis . . .	1	Institutional care and syphilitic treatment.	Patient disappeared.
With epilepsy . . .	3	Institutional care . . .	1, advice not followed. 2, patient to report in six months. 3, admission pending.

DIAGNOSIS.	No.	Recommendations.	Disposal.
<i>III. Neurological.</i>			
Cerebral irritation associated with tuberculosis.	1	Tubercular hygiene schedule planned for patient and family, in care of board of health nurse.	Plans being carried out.
Post-cerebral hemorrhage; paralysis.	1	Schedule planned for patient. Moderate exercise, modified diet, etc.	Plans being carried out.
<i>IV. Syphilitic.</i>			
Cerebral spinal syphilis	4	Intensive bi-weekly treatments.	3, treatment carried out at Worcester State Hospital out-patient department. 1, patient disappeared.
Secondary syphilis	1	Intensive bi-weekly treatments.	Treatments carried out at Worcester State Hospital out-patient department.
Tabo-paresis	2	Intensive treatment and hospital care. Out-patient department to report.	Advice not followed.
<i>V. Without Psychoses.</i>			
Chorea		Referred to nose and throat specialist.	Given treatment at Worcester State Hospital out-patient department. Condition improved.
Tonsils and adenoids plus speech defect.	1	Removal of tonsils and adenoids.	Tonsilectomy arranged for at Memorial Hospital.
Hyperthyroidism (adolescent).	1	Quiet mode of living, rest, fresh air, good food, as scheduled.	Plans being carried out. Condition improved.
<i>Maladjusted:</i>			
(a) School	1	Treatment for ears	Advice given to teacher and school nurse as to their attitudes toward patient. Condition improved.
(b) Home	3	Remove patients from present homes. Place in good care.	Further placement in hands of Children's Friend Society.
(c) Social	1	Remove patient from own home; attention to recreation.	Arrangements pending.
Conduct problem	1	Replacement	Patient in hand of Children's Friend Society.
Routine out-patient department examination.	11	Supervision; more thorough study and investigation.	Patient in care of Girl's Welfare Society.
<i>VI. Undiagnosed.</i>			
Routine out-patient department examination.	1	Further investigation; patient to report to clinic again in six months.	Patient being cared for by Girls' Welfare Society.
	5	Patients to report in six months.	None made.

Type of Cases seen, School Out-patient Clinic.

<i>Feeble-minded.</i>			
(a) Simple feeble-minded.	16	Special classes,—training along manual lines and correction of pathological conditions.	Arrangements pending for carrying out recommendations.
(b) Feeble-minded requiring institutional care.	1	Institutional care.	- -
(c) Feeble-minded potential psychotics.	2	Special classes,— training along manual lines. To report to Worcester State Hospital out-patient department every six months.	Arrangements pending for carrying out recommendations.
Diagnosis deferred	3	To report in six months for further study.	- -
Cases in partial state of completion.	27	Pending.	- -

COMMUNITY ACTIVITIES.

The following lectures have been given by members of the staff during the year: —

Clinic for students of Clark University held at Worcester State Hospital	Dr. Bryan.
Lecture on Mental Hygiene before Kosmos Club of Wakefield	Dr. Bryan.
Lecture before Psychology Club of Worcester	Dr. Bryan.
Paper on Mental Hygiene read at meeting of the Worcester District Medical Association	Dr. Bryan.
Psychology of Insanity, before medical staff of St. Vincent's Hospital	Dr. O'Meara.
Anatomy of the Nervous System, before nurses of St. Vincent's Hospital	Dr. O'Meara.
Brain and Nervous System, before nurses of Worcester City Hospital and Rutland State Sanatorium	Dr. O'Meara.
Causes, Classification and Prevention of Mental Diseases, before the nurses of Worcester City Hospital and Rutland Sanatorium	Dr. O'Meara.
Mental Hygiene, before the nurses of Worcester City Hospital and Rutland State Sanatorium	Dr. O'Meara.
Involution Melancholia, given at a meeting of the assistant physicians	Dr. Gaunt.
Origin and Scope of the Modern State Hospital, given at a meeting of the assistant physicians	Dr. Bonner.
Lecture on Social Service before the Women's Club of Marlborough	Miss Harrington.

The following papers have been published or submitted for publication during the past year: —

Paresis — Treatment, Arsphenamine, Mercury and Potassium Iodide	Dr. Bonner.
The Origin and Scope of the Modern State Hospital	Dr. Bonner.
Adrenalin in Terminal Dementia	Dr. Bonner.
Pathological Changes occurring in Epidemic Encephalitis	Dr. Ada Harris.
Acute Encephalitis	Dr. Ada Harris.
Involution Melancholia	Dr. George Gaunt.
An Experiment with Simple Tests for the Insane	Miss Marjory Bates.

A course has been inaugurated to which all social workers, school nurses and those dealing with the mentally deficient

were invited to attend. The following is the program of lectures, the first and second of which have been given at our Summer Street Department:—

Lecture I. Nov. 9, 1921, by Dr. William A. Bryan.

Introduction, History of Psychiatry. Types of Reaction, Mental Mechanisms.

Lecture II. Dec. 14, 1921, by Dr. Clarence Bonner.

Methods of Procedure in Caring for Community Patients who need Psychiatric Treatment. Subtopics: (a) Symptoms which indicate the need of hospital commitment; (b) factors that determine the discharge and retention of State hospital patients; (c) common forms of diagnosis and their social interpretation. Illustrations.

Lecture III. Jan. 11, 1922, by Dr. Leon Duval.

Types of Conduct Disorder and Character Changes which indicate the Need of Mental Examination and Treatment. Procedure — Illustrations.

Lecture IV. Feb. 8, 1922, by Miss Jennie Harrington.

The Relation of the State Hospital to the Social Agency. Sub-topics: Customs and traditions of the hospital relative to giving information to outside agencies; nature of information which hospital may contribute to agencies, and nature of assistance which hospital may render to such agencies.

Lecture V. March 8, 1922, by Dr. Michael O'Meara.

State Hospital Methods of Caring for Mental Patients. Sub-topics: Legal relationships; purpose of hospital departments and their functions; treatment of patients, clinics, social service, out-patient service, etc.

Lecture VI. April 12, 1922, by Dr. William A. Bryan.

Showing forms of mental diseases.

REPORT OF THE SOCIAL SERVICE DEPARTMENT.

To the Superintendent.

For several years the work of the social service department has been conducted by one worker, but since September 18 the department has had the services of Miss Mary Wallace Howgate, a graduate of Smith College and Smith College Training School for Social Work.

A great deal of the work that a social worker in a State hospital is called upon to do is of a miscellaneous character. It is the doing of kind little things, both for the patient and his family. Looking up patients' clothing, securing his wages,

referring his family to various agencies for help, and numerous other deeds are a part of the work of helping the patient to recover by relieving his mind from worry.

The social worker studies the patient, his family, his job, his home surroundings, his recreation, his friends, etc., with a view to better adjustments of these relationships, so that a recovery is more possible and a recurrence less likely. Many times the irritating influences have been removed by social service, and the other factors in the environment have been made helpful. The department is an important connecting link between the hospital and the community, for many erroneous impressions of the hospital have been corrected by the workers.

The social work of the hospital may be divided into the following groups: —

- I. *Social Case Work.* — A social case is one in which there is social problem needing adjustment.
 - (a) Environmental and adjustment problems pertaining to home, work, friends and recreation.
- II. *History Work.* — The social worker goes into the community to obtain a history in cases where no relatives come to the hospital, or where there is some social problem involved.
 - (a) Medical history for medical diagnosis.
 - (b) Social history for social treatment.
 - (c) Medical social history for medical diagnosis and social treatment.
- III. *Investigations.* — Made for object of helping patient.
 - (a) Court investigation.
 - (b) Home investigation.
 - (c) Boarding homes investigation.
 - (d) Complaint investigations.
 - (e) Miscellaneous.
- IV. *Supervision.*
 - (a) Patients on visit.
 - (b) Boarding patients.
 - (c) Miscellaneous cases.
- V. *Community Work.*
 - (a) Social agencies.
 - (b) Linking hospital with community.
- VI. *Educational Work.*
 - (a) Lectures.
 - (b) Advice.
- VII. *Out-patient Work.*
 - (a) Hospital clinics.
 - (b) School clinics.

TABLE A.—*Reason for Consideration.*

	Males.	Females.	Totals.
Medical histories	56	53	109
Medical social histories	41	23	64
Home investigation	12	22	34
Special investigation	14	11	25
Social investigation	17	22	39
Supervision	71	121	192
Family assistance	1	1	2
Boarding patients	—	25	25
Venereal disease clinic	1	—	1
Miscellaneous	20	12	32
	233	290	523

TABLE B.—*Clinic Work.*

	Males.	Females.	Totals.
Patients interviewed at clinics	34	38	72
Relatives interviewed at clinics	19	12	31
Social cases selected at clinics	2	4	6
	55	54	109

TABLE C.—*Service Rendered.*

	Males.	Females.	Totals.
Arrangements made for medical care	3	16	19
Readjustment in home	6	13	19
Readjustment in work	2	8	10
Readjustment in recreation	4	5	9
Readjustment in church	1	—	1
Arrangements for community supervision	15	5	20
Referred to relief agencies	4	2	6
Referred to special agencies	15	11	26
Referred to venereal disease clinics	1	4	5
Referred to employment agencies	5	3	8
Legal aid secured	3	4	7

TABLE C.—*Service Rendered*—Concluded.

	Males.	Females.	Totals.
Advice to patient	17	60	77
Advice to relatives	40	46	86
Boarding patients visited	—	99	99
Property cared for	3	10	13
Assisting Red Cross with compensation claims . . .	13	—	13
	132	286	418

It is hoped that with another worker the work of the department may be developed along new lines. More efficient work could be accomplished with the use of a department automobile.

I wish to express my appreciation for the aid and counsel given me by Miss Hannah Curtis, the director of social work of the Department of Mental Diseases, and for the co-operation of the hospital staff and the ready response of help from the social agencies.

Respectfully submitted,

JENNIE A. HARRINGTON,
Social Worker.

Nov. 30, 1921.

TRAINING SCHOOL FOR NURSES.

I herewith submit the following report on the Training School of the Worcester State Hospital for the year 1921:—

Graduated a class of 14 members,—13 women and one man. Present senior class consists of 13 women; present intermediate class, 9 women; first-year students, 22 women.

Graduation exercises were held September 15. Dr. Myerson of Boston addressed the class. Miss Caswell, a member of the Board of Trustees, presented the diplomas. After the exercises a reception and dance was enjoyed by the graduates and their friends.

On June 25 the Training School had the honor of entertaining Miss Linda Richards at an informal tea. She recounted many interesting incidents regarding her work here while organizing the Training School in 1903. Our graduates now number 209.

The Alumnae Association has held quarterly meetings at the hospital, and after the business meeting a social hour is indulged

in. The Training School has been represented at the various State meetings and also at the American Nurses Association Meeting held at Concord, N. H. The Worcester branch of the Massachusetts State Nurses Association was entertained at the hospital. During the evening Dr. Wright of Boston State Hospital gave an interesting talk on hydrotherapy.

The affiliation with Boston City Hospital which had been ten months was extended to one year. Interest in the Training School has been stimulated by these various activities, and it is gratifying to notice an increase in the number of desirable applicants during the past few months.

Merle B. Malsbury, R.N., assistant superintendent of nurses, resigned to accept the position of superintendent of nurses at the Bangor State Hospital. The vacancy has recently been filled by Florence Wooldridge, R.N.

ELsie I. RICHARDS,
Superintendent of Nurses.

RELIGIOUS SERVICES.

Religious services have been held regularly each Sunday at both the main hospital and the Summer Street Department, a Catholic clergyman officiating in the forenoon and a Protestant clergyman in the afternoon. Response to sick calls and the rites of their religion to the dying have been faithfully made by members of the clergy.

ENTERTAINMENTS AND AMUSEMENTS.

Acknowledgment is made to the following individuals and organizations for entertainments given during the year:—

In February, 1921, an entertainment was provided at the Summer Street Department by the Knights of Columbus, including glee club work, solos and instrumental music.

At the main institution we have been favored, under the direction of Mrs. Oscar P. Tabor, with a pageant which was very enjoyable to the patients.

The Auxiliary of the American Legion on two different occasions entertained the soldiers in the recreation room with instrumental and vocal music.

One moving-picture entertainment by the Kirk Soap Company was provided.

On November 17, through the courtesy of our storekeeper, Mr. William Scott, the Kiltie Clan gave an entertainment at the main hospital, and on the 18th a very enjoyable entertainment at the Summer Street Department.

On Thursday, December 29, the American Legion and the Women's Auxiliary gave a most enjoyable program, consisting of seventeen numbers, for the benefit of the ex-soldiers and other patients.

On December 28 a number of our talented patients, accompanied by several physicians, gave an entertainment to the patients at Westborough.

During the summer months a baseball team played every Saturday afternoon and made trips to other hospitals. An interhospital league has been suggested and would seem to be an excellent idea.

The weekly moving-picture shows have been productive of considerable good, and have contributed materially to the recovery of a certain number of patients, as have also the weekly dances.

A hospital orchestra has been organized, and it is our intention to make music a very important therapeutic measure.

The various holidays have been observed by special entertainments.

NEW CONSTRUCTION.

General Operations for the Year.

Many minor repairs have been made in the building during the course of the year. The cattle barns at the main building and Hillside have been repainted both inside and out. All the porches at the main hospital have been painted, the fence at Summer Street, and three cottages for employees, in addition to the outside work. Washburn I, which is now used as a receiving ward, has been entirely renovated and new clothes rooms built, new toilets put in and the entire ward painted.

The industrial department, under the direction of Mr. Corkum, has scraped and refinished over a thousand pieces of furniture during the year in addition to rematting and refinishing practically every picture in the hospital. A complete

reclassification of the wards has been made, the first floor on each side now being used as a reception service.

A large salvage yard has been completed where articles no longer in use can be taken and either salvaged, stored in a proper manner or sold as junk. The utility of this yard has been shown since it was built.

Comprehensive plans have been made and the work begun of centralizing the storerooms of the hospital in one corridor. The work of renovating the laundry has been completed, and the necessity for this renovation is shown by its increased efficiency.

Certain changes have been made in the disposition of garbage which have proven to be in the interest of cleanliness.

All farm implements have been repainted and repaired. About 200,000 feet of chestnut lumber was sawed during the early part of the year. The trees had begun to decay, and the lumber was salvaged before such destruction had progressed far enough to destroy them.

Much work has been done on the boilers, two of them having been completely reset.

NEEDS.

Certain special needs for which an appropriation is requested are as follows:—

Refrigeration Plant.—This hospital has no adequate means of refrigeration. The antiquated ice boxes now in use are inadequate for our needs, and a great many articles of food are rendered useless each year because of our inability to maintain a proper temperature. A combined refrigerating plant and storehouse, with an ice-making machine of adequate capacity, would increase our efficiency a great deal. The present ice house is not large enough for our needs, and each year it is necessary to go into the market and buy a considerable quantity of ice to care for our needs during the latter part of the year.

We have sixteen different storerooms, all located in the basement, and this requires a larger force of storeroom employees than would seem to be necessary if a storeroom was all under one roof.

Congregate Dining Room. — The dining-room facilities for patients at this hospital are very inadequate, and it is impossible to give the best service in feeding our patients while they are in use. Each ward has a dining room, in all, 42, and in no case are these dining rooms equipped for the purpose for which they are used. A number of them have no facilities for washing dishes. The construction of a congregate dining room would enable us to give our patients hot food served in a better manner which would contribute a great deal to their comfort.

Some attention should also be given to the needs of our present kitchen. The equipment is almost entirely of wood and should be replaced by steel equipment. Our kettles are of the old type with no outlet for the purpose of cleaning. These should be replaced by modern aluminum kettles. The present ventilating system in the kitchen is inadequate and does not take care of the various cooking odors. When certain conditions are present the odor of food can be detected in the entrance hall.

Fireproof Stairways. — We have at the present time seven wooden staircases in the main building which make a great fire hazard. The shafts in which they are built would cause the flames to spread rapidly from one floor to another. These wooden staircases should be replaced by iron structures.

Automatic sprinklers are needed in the attic of both the main building and the Summer Street Department. The fire hazard is very great, and the installation of these would furnish a protection that can be secured in no other way.

In conclusion I wish to express my grateful appreciation to the members of the Board of Trustees for their interest and helpful suggestions in the work of the hospital. They have supported me in all things, and have been untiring in their efforts and given freely of their time to assist us in the care and treatment of the patients.

To the loyal officers and employees who have so splendidly co-operated in the work of the year I also wish to express my grateful acknowledgment.

WILLIAM A. BRYAN,
Superintendent.

VALUATION.

Nov. 30, 1921.

REAL ESTATE.

Land (589 acres)	\$416,357 00
Buildings	2,174,812 76
	\$2,591,169 76

PERSONAL PROPERTY.

Travel	\$872 23
Food	14,936 10
Clothing and materials	35,062 58
Furnishings and household supplies	182,097 21
Medical and general care	8,869 18
Heat, light and power	50,193 84
Farm	50,986 44
Garage, stable and grounds	13,238 61
Repairs	15,103 50
	\$371,359 69

SUMMARY.

Real estate	\$2,591,169 76
Personal property	371,359 69
	\$2,962,529 45

TREASURER'S REPORT.

To the Department of Mental Diseases.

I respectfully submit the following report of the finances of this institution for the fiscal year ending Nov. 30, 1921:—

CASH ACCOUNT.

Balance Dec. 1, 1920	\$4,092 18
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*Receipts.**Income.*

Board of inmates:

Private	\$40,139 24
Reimbursements, insane	42,997 60
	<hr/>
	\$83,136 84

Personal services:

Reimbursement from Board of Retirement	180 77
--	--------

Sales:

Travel, transportation and office expenses	\$41 69
Food	133 10
Clothing and materials	173 48
Furnishings and household supplies	1,289 11
Medical and general care	3 78
Heat, light and power	9 55

Farm:

Cows and calves	\$310 97
Pigs and hogs	24 28
Hides	33 81
	<hr/>
	369 06
Garage, stable and grounds	71 95
Repairs, ordinary	656 29
	<hr/>
	2,748 01

Miscellaneous:

Interest on bank balances	\$1,096 58
Rent	1,239 62
	<hr/>
	2,336 20
	<hr/>
	88,401 82

Receipts from Treasury of Commonwealth.

Maintenance appropriations:

Balance of 1920	\$60,043 44
Advance money (amount on hand November 30)	48,000 00
Approved schedules of 1921	608,835 02
	<hr/>
	716,878 46
Special appropriations	21,058 69
	<hr/>
Total	\$830,431 15

Payments.

To treasury of Commonwealth, institution income	\$88,401 82
Maintenance appropriations:	
Balance of schedules of previous year	\$64,135 62
Eleven months' schedules, 1921	608,835 02
November advances	26,967 28
	<hr/>
	699,937 92
Special appropriations, approved schedules	21,058 69
Balance Nov. 30, 1921:	
In bank	\$20,361 78
In office	670 94
	<hr/>
	21,032 72
Total	\$830,431 15

MAINTENANCE.

Balance from previous year, brought forward	\$1,299 65
Appropriation, current year	740,400 00
	<hr/>
Total	\$741,699 65
Expenses (as analyzed below)	677,769 55
	<hr/>
Balance reverting to treasury of Commonwealth	\$63,930 10

Analysis of Expenses.

Personal services:	
B. Henry Mason, acting superintendent	\$1,061 67
William A. Bryan, superintendent	2,380 00
Medical	12,624 85
Administration	20,151 16
Kitchen and dining-room service	12,516 14
Domestic	30,800 19
Ward service (male)	65,371 33
Ward service (female)	60,878 34
Industrial and educational department	4,185 21
Engineering department	28,500 84
Repairs	19,759 20
Farm	13,265 99
Stable, garage and grounds	4,469 00
	<hr/>
	\$275,963 92
Religious instruction:	
Catholic	\$1,200 00
Hebrew	260 00
Protestant	375 00
	<hr/>
	1,835 00
Travel, transportation and office expenses:	
Advertising	\$75 43
Postage	475 90
Printing and binding	1,276 05
Printing annual report	257 57
	<hr/>
Amounts carried forward	\$2,084 95
	<hr/>
	\$277,798 92

<i>Amounts brought forward</i>	. . . . .	\$2,084 95	\$277,798 92
Travel, transportation and office expenses — <i>Con.</i>			
Stationery and office supplies	. . . . .	2,764 90	
Telephone and telegraph	. . . . .	2,101 34	
Travel	. . . . .	2,045 47	
			8,996 66
Food:			
Flour	. . . . .	\$23,199 76	
Cereals, rice, meal, etc.	. . . . .	4,865 37	
Bread, crackers, etc.	. . . . .	542 54	
Peas and beans (canned and dried)	. . . . .	3,142 94	
Macaroni and spaghetti	. . . . .	1,219 87	
Potatoes	. . . . .	4,496 83	
Meat	. . . . .	39,472 94	
Fish (fresh, cured and canned)	. . . . .	7,172 46	
Butter	. . . . .	6,446 05	
Butterine, etc.	. . . . .	8,934 97	
Peanut butter	. . . . .	2 70	
Cheese	. . . . .	2,345 31	
Coffee	. . . . .	916 61	
Coffee substitutes	. . . . .	1,021 69	
Tea	. . . . .	547 88	
Cocoa	. . . . .	105 52	
Whole milk	. . . . .	129 07	
Milk (condensed, evaporated, etc.)	. . . . .	1,344 56	
Eggs (fresh)	. . . . .	8,114 04	
Egg powders, etc.	. . . . .	1,021 40	
Sugar (cane)	. . . . .	5,807 35	
Fruit (fresh)	. . . . .	1,339 53	
Fruit (dried and preserved)	. . . . .	9,109 34	
Lard and substitutes	. . . . .	1,855 92	
Molasses and syrups	. . . . .	1,189 51	
Vegetables (fresh)	. . . . .	741 09	
Vegetables (canned and dried)	. . . . .	559 81	
Seasonings and condiments	. . . . .	1,575 72	
Yeast, baking powder, etc.	. . . . .	466 91	
Sundry foods	. . . . .	731 96	
			138,419 65
Clothing and materials:			
Boots, shoes and rubbers	. . . . .	\$3,614 29	
Clothing (outer)	. . . . .	7,668 96	
Clothing (under)	. . . . .	2,770 19	
Dry goods for clothing	. . . . .	2,984 53	
Hats and caps	. . . . .	248 64	
Leather and shoe findings	. . . . .	188 61	
Socks and smallwares	. . . . .	1,651 24	
			19,126 46
Furnishings and household supplies:			
Beds, bedding, etc.	. . . . .	\$12,006 09	
Carpets, rugs, etc.	. . . . .	1,327 78	
Crockery, glassware, cutlery, etc.	. . . . .	1,972 90	
Dry goods and smallwares	. . . . .	1,394 52	
Electric lamps	. . . . .	1,439 95	
<i>Amounts carried forward</i>	\$18,141 24	\$444,341 69

<i>Amounts brought forward</i>	<i>\$18,141 24</i>	<i>\$444,341 69</i>
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Furnishings and household supplies—*Con.*

Fire hose and extinguishers	477 27
Furniture, upholstery, etc.	3,865 33
Kitchen and household wares	6,118 10
Laundry supplies and materials	3,225 77
Lavatory supplies and disinfectants	2,075 30
Machinery for manufacturing	50 21
Table linen, paper napkins, towels, etc.	2,191 14
	36,144 36

Medical and general care:

Books, periodicals, etc.	\$585 70
Entertainments, games, etc.	2,059 40
Funeral expenses	958 00
Gratuities	17 00
Ice and refrigeration	1,472 99
Laboratory supplies and apparatus	274 46
Manual training supplies	113 82
Medicines (supplies and apparatus)	5,781 88
Medical attendance (extra)	895 72
Patients boarded out	2,623 22
Return of runaways	151 66
Tobacco, pipes, matches	2,657 46
Water	8,309 26
Sewerage (chapter 165, Special Acts of 1919)	2,400 00
	28,300 57

Heat, light and power:

Coal (bituminous) ¹	\$39,692 14
Freight and cartage	36,681 46
Coal (screenings)	11,811 79
Coal (anthracite)	6,057 33
Freight and cartage	2,322 65
Electricity	263 90
Gas	1,373 65
Oil	556 81
Operating supplies for boilers and engines	346 36
Sundries	20 00
	99,126 09

Farm:

Bedding materials	\$500 24
Blacksmithing and supplies	510 81
Carriages, wagons and repairs	469 50
Dairy equipment and supplies	389 91
Fencing materials	7 56
Fertilizers	995 79
Grain, etc.	11,508 77
Hay	8,161 78
Harnesses and repairs	210 04
Cows	83 96
Other live stock	725 00
	\$23,563 36

<i>Amounts carried forward</i>	<i>\$23,563 36</i>	<i>\$607,912 71</i>
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¹ Includes refund of \$454.71 on coal which came through care of medical department and did not go through institution cash.

Amounts brought forward \$23,563 36 \$607,912 71

Farm — *Con.*

Labor (not on pay roll)	66 73
Rent	250 00
Spraying materials	200 65
Stable and barn supplies	98 00
Tools, implements, machines, etc.	1,175 23
Trees, vines, seeds, etc.	711 58
Veterinary services, supplies, etc.	659 81
Lime	236 12
	—————
	26,961 48

Garage, stable and grounds:

Motor vehicles	\$1,805 77
Automobile repairs and supplies	5,072 42
Blacksmithing and supplies	105 12
Carriages, wagons and repairs	13 15
Hay	351 99
Harnesses and repairs	4 10
Road work and materials	250 00
Stable supplies	25 08
Tools, implements, machines, etc.	246 01
Trees, vines, seeds, etc.	64 42
Veterinary	5 50
	—————
	7,943 56

Repairs, ordinary:

Cement, lime, crushed stone, etc.	\$1,192 58
Electrical work and supplies	879 04
Hardware, iron, steel, etc.	2,999 68
Lumber, etc. (including finished products)	3,347 23
Paint, oil, glass, etc.	6,655 69
Plumbing and supplies	2,658 36
Roofing and materials	2,209 96
Steam fittings and supplies	981 09
Tools, machines, etc.	572 66
Boilers, repairs	1,902 84
DYNAMOS, repairs	32 98
Engines, repairs	428 39
	—————
	23,860 50

Repairs and renewals:

Hand stoker type for two boilers	\$848 10
Corn-shelling machine	264 72
Laundry machinery	8,365 00
Telephone line	449 70
Woodward porches	1,163 78
	—————
	11,091 30

Total expenses for maintenance \$677,769 55

SPECIAL APPROPRIATIONS.

Balance Dec. 1, 1920		\$24,874 43
Appropriations for current year		16,000 00
Total		\$40,874 43
Expended during the year (see statement below)	\$21,577 61	
Reverting to treasury of Commonwealth	5 22	
		21,582 83
Balance Nov. 30, 1921, carried to next year		\$19,291 60

OBJECT.	Act or Resolve.	Whole Amount.	Expended during Fiscal Year.	Total expended to Date.	Balance at End of Year.
Water supply	Chap. 95, Res. 1917.	\$11,385 00	\$6,580 75	\$11,207 64	\$177 36
Renovating the plumbing	Chap. 153, Sp. Acts 1919.	5,500 00	361 53	5,498 46	1 54*
Alterations of buildings, Hillside Farm.	Chap. 153, Sp. Acts 1919.	5,500 00	103 49	5,497 89	2 11*
Worcester department, heating system. ¹	Chap. 123, Res. 1917.	3,758 72	498 67	644 48	3,114 24
Alterations to laundry	Chap. 225, Acts 1920.	21,000 00	3,220 36	20,998 43	1 57*
Water supply for fire protection.	Chap. 225, Acts 1920.	17,000 00	10,812 81	17,000 00	-
Alterations in heating shaft	Chap. 203, Acts 1921.	16,000 00	-	-	16,000 00
		\$80,143 72	\$21,577 61	\$60,846 90	\$19,296 82

* Balance reverting to the treasury of the Commonwealth	\$5 22
Balance carried to next year	19,291 60
Total as above	\$19,296 82

RESOURCES AND LIABILITIES.

Resources.

Cash on hand	\$21,032 72
November cash vouchers (paid from advance money), account of maintenance	26,967 28
	\$48,000 00
Due from treasury of Commonwealth from available appropriation, account of November, 1921, schedule	21,389 24
Special appropriations	518 92

Liabilities.

Outstanding schedules of current year:	
Schedule of November bills	\$69,389 24
Special appropriations	518 92
	\$69,908 16

¹ Transferred from Grafton State Hospital Dec. 1, 1919.

PER CAPITA.

During the year the average number of inmates has been 2,027.65.

Total cost for maintenance, \$677,769.55.

Equal to a weekly per capita cost of \$6.4281.

Receipt from sales, \$2,748.01.

Equal to a weekly per capita of \$0.0260.

All other institution receipts, \$85,653.81.

Equal to a weekly per capita of \$0.8123.

Net weekly per capita cost, \$5.5898.

Respectfully submitted,

JESSIE M. D. HAMILTON,
Treasurer.

Examined and found correct as compared with the records in the office of the Auditor of the Commonwealth.

ALONZO B. COOK,
Auditor.

STATEMENT OF FUNDS.

PATIENTS' FUND.

Balance on hand Nov. 30, 1920	. . .	\$9,340 57
Receipts	. . . . .	10,115 09
Interest	. . . . .	329 21
		—————
Refunded	. . . . .	\$8,191 09
Interest paid to State Treasurer	. . . .	329 21
		—————
		8,520 30
		—————
		\$11,264 57

Investment.

Worcester County Institution for Savings	. .	\$2,000 00
Worcester Five Cents Savings Bank	. .	2,000 00
Worcester Mechanics Savings Bank	. .	2,000 00
Peoples Savings Bank	. . . .	2,000 00
Balance Worcester Bank and Trust Company	. .	2,996 72
Cash on hand Dec. 1, 1921	. . .	267 85
		—————
		\$11,264 57

LEWIS FUND.

Balance on hand Nov. 30, 1920	. . .	\$1,754 32
Income	. . . . .	67 85
		—————
Expended for pictures, books, etc.	. . . . .	179 38
		—————
		\$1,642 79

Investment.

American Telephone and Telegraph Company collateral trust 4 per cent bond	. . . .	\$926 36
Fourth Liberty Loan bonds	. . . .	600 00
Balance Worcester Bank and Trust Company	. .	116 43
		—————
		\$1,642 79

WHEELER FUND.

Balance on hand Nov. 30, 1920	\$6,539 00
Income	308 82
	—————
Expended for entertainments, magazines, etc.	\$6,847 82
	475 08
	—————
	\$6,372 74

Investment.

American Telephone and Telegraph Company collateral trust 4 per cent bond	\$712 50
Third Liberty Loan bonds	4,000 00
Fourth Liberty Loan bonds	1,300 00
Balance Worcester Bank and Trust Company	360 24
	—————
	\$6,372 74

MANSON FUND.

Balance on hand Nov. 30, 1920	\$1,347 98
Income	50 98
	—————
Expended for entertainments	\$1,398 96
	120 27
	—————
	\$1,278 69

Investment.

Fourth Liberty Loan bonds	\$1,100 00
Balance Worcester Bank and Trust Company	178 69
	—————
	\$1,278 69

Respectfully submitted,

JESSIE M. D. HAMILTON,
Treasurer.

Nov. 30, 1921.

N. B. — The values assigned to the above securities are their respective purchase prices.

STATISTICAL TABLES

AS ADOPTED BY AMERICAN PSYCHIATRIC ASSOCIATION

PREScribed BY MASSACHUSETTS DEPARTMENT OF MENTAL DISEASES

STATISTICAL TABLES.

TABLE 1.—*General Information.*

1. Date of opening as an institution for the insane: Jan. 18, 1833.

2. Type of institution: State.

3. Hospital plant:

Value of hospital property:

Real estate, including buildings	.	.	.	.	\$2,591,169	76
Personal property	.	.	.	.	371,359	69
Total	.	.	.	.	\$2,962,529	45

Total acreage of hospital property, 589.16.

Acreage under cultivation during previous year, 263.75.

4. Medical service:

	Men.	Women.	Totals.
Superintendent	1	—	1
Assistant physicians	7	—	7
Medical internees	—	—	—
Dentist	1	—	1
Total physicians	9	—	9

5. Employees on pay roll (not including physicians):

	Men.	Women.	Totals.
Graduate nurses	1	16	17
Other nurses and attendants	112	100	212
All other employees	78	77	155
Total employees	191	193	384

6. Patients employed in industrial classes or in general hospital work on date of report

Men.	Women.	Totals.
543	401	944

7. Patients in institution on date of report (excluding paroles)

1,051	1,042	2,093
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TABLE 2.—*Financial Statement.*

See treasurer's report for data requested under this table.

TABLE 3.—*Movement of Patient Population for the Year ending Sept. 30, 1921.*

	INSANE.				TEMPORARY CARE.				SANE, VOLUNTARY.				TOTAL ON BOOKS.			
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	
1. Patients on books of institution Sept. 30, 1920	1,169	1,098	2,267	2	-	2	1	1	2	1,172	1,099	2,271				
Admissions during year:																
(a) First admissions	272	174	446	11	6	17	-	-	-	283	180	463				
(b) Readmissions	84	43	127	4	16	16	-	-	-	96	47	143				
Total admissions	356	217	573	23	10	33	-	-	-	379	227	606				
(c) Transfers from other institutions for the insane	3	7	10	-	-	-	-	-	-	3	7	10				
Nominally admitted for change of status	2	-	2	-	-	-	-	-	-	2	-	2				
Total received during year	361	224	585	23	10	33	-	-	-	384	234	618				
3. Total under treatment during year	1,580	1,322	2,852	25	10	35	1	1	2	1,556	1,323	2,889				
Discharged from books during year:																
(a) As recovered	19	31	50	6	1	7	-	-	-	25	32	57				
(b) As improved	104	50	154	3	1	4	-	-	-	107	50	157				
(c) As unimproved	20	7	27	2	4	6	-	-	-	22	11	33				
(d) As not insane	4	3	7	8	3	11	-	-	-	12	6	18				
(e) Transferred to other institutions for the insane	10	4	14	-	-	-	-	-	-	10	4	14				
(f) Died during year	137	103	240	-	-	-	1	1	1	138	103	241				
(g) Nominally dismissed for change of status	-	-	2	-	-	-	-	-	-	1	2	2				
(h) Total discharged from books during year	294	198	492	21	8	29	1	1	1	316	206	522				
5. Patients remaining on books of Institution Sept. 30, 1921	1,236	1,124	2,360	4	2	6	-	-	-	1,240	1,127	2,367				
<i>Supplementary Data.</i>																
6a. Average daily number of patients on books during year	1,172	61	1,107	15	2,279	76	4.06	2.24	6.30	.77	1.00	1.77	1,177	44	1,110	39
6b. Average daily number of patients actually in the institution during year	1,008	24	974	31	1,982	55	4.06	2.24	6.30	.77	1.00	1.77	1,013	07	977	55
7a. Average daily number of patients in family care	-	24	11	24	11	-	-	-	-	-	-	-	24	11	24	11
7b. Average daily number of patients on visit and escape	164	37	108	73	273	10	-	-	-	1	-	1	164	37	108	73
8. Number of voluntary patients admitted during year	-	11	7	18	-	135	71	-	-	1	-	1	12	7	273	10
9. Number of temporary cases admitted during year	-	-	-	-	-	206	-	-	-	-	-	-	135	71	19	206
10. Number of patients actually remaining in institution Sept. 30, 1921	1,044	1,006	2,050	4	3	7	-	-	-	1	1	1	1,048	1,010	2,058	
State	971	873	1,844	4	3	7	-	-	-	1	1	1	975	877	1,852	
Reimbursing	43	61	104	3	2	5	-	-	-	43	61	104				
Private	30	72	102	-	-	-	-	-	-	-	-	-	30	72	102	

TABLE 4.—*Nativity of First Admissions and of Parents of First Admissions.*

NATIVITY.	PATIENTS.			PARENTS OF MALE PATIENTS.			PARENTS OF FEMALE PATIENTS.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
United States	131	71	202	62	57	119	26	29	55
Albania	4	-	4	4	4	8	-	-	-
Armenia	3	3	6	3	3	6	3	3	6
Austria	2	3	5	3	3	6	3	3	6
Belgium	-	-	1	-	-	1	-	-	-
Canada	25	31	56	39	44	83	30	29	59
Central America	1	-	1	-	-	-	-	-	-
China	2	-	2	3	3	6	-	-	-
Denmark	1	-	1	1	1	2	-	-	-
England	5	3	8	7	5	12	11	7	18
Finland	4	4	8	4	4	8	4	4	8
France	3	-	3	5	4	9	1	-	1
Germany	6	2	8	10	10	20	3	3	6
Greece	8	3	11	8	8	16	3	3	6
Ireland	20	24	44	39	39	78	38	39	77
Italy	12	9	21	12	12	24	10	10	20
Norway	3	-	3	3	3	6	-	-	-
Poland	8	2	10	11	11	22	2	2	4
Portugal	4	-	4	4	4	8	-	-	-
Russia	8	7	15	9	9	18	12	12	24
Scotland	5	4	9	5	6	11	6	8	14
Spain	2	1	3	2	2	4	1	1	2
Sweden	6	4	10	6	6	12	4	4	8
Switzerland	1	-	1	1	1	2	-	-	-
Syria	-	1	1	-	-	-	1	1	2
Turkey in Asia	1	-	1	1	1	2	-	-	-
West Indies	2	-	2	2	2	4	-	-	-
Total foreign born	136	101	237	183	185	368	132	129	261
Unascertained	5	2	7	27	30	57	16	16	32
Grand totals	272	174	446	272	272	544	174	174	348

TABLE 5.—*Citizenship of First Admissions.*

	Males.	Females.	Totals.
Citizens by birth	131	71	202
Citizens by naturalization	17	12	29
Aliens	119	89	208
Citizenship unascertained	5	2	7
Totals	272	174	446

TABLE 6.—*Psychoses of First Admissions.*

PSYCHOSES.				Males.	Females.	Totals.	Males.	Females.	Totals.
1. Traumatic, total	.	.	.	.	.	.	1	-	1
(a) Traumatic delirium	.	.	.	-	-	-			
(b) Traumatic constitution	.	.	.	-	-	-			
(c) Post-traumatic mental enfeeblement (dementia)	.	.	.	1	-	1			
(d) Other types	.	.	.	-	-	-			
2. Senile, total	.	.	.	10	18	28	15	27	42
(a) Simple deterioration	.	.	.	-	-	-			
(b) Presbyophrenic type	.	.	.	-	-	-			
(c) Delirious and confused types	.	.	.	-	-	-			
(d) Depressed and agitated types	.	.	.	-	-	-			
(e) Paranoid types	.	.	.	5	9	14			
(f) Pre-senile type	.	.	.	-	-	-			
(g) Other types	.	.	.	-	-	-			
3. With cerebral arteriosclerosis	.	.	.	.	.	.	31	15	46
4. General paralysis	.	.	.	.	.	.	27	7	34
5. With cerebral syphilis	.	.	.	.	.	.	6	2	8
6. With Huntington's chorea	.	.	.	.	.	.	-	1	1
7. With brain tumor	.	.	.	.	.	.	-	-	-
8. With other brain or nervous diseases, total	.	.	.	.	.	.	2	2	4
(a) Cerebral embolism	.	.	.	1	-	1			
(b) Paralytic agitans	.	.	.	1	-	1			
(c) Meningitis, tubercular or other forms (to be specified)	.	.	.	-	-	-			
(d) Multiple sclerosis	.	.	.	-	-	-			
(e) Tabes dorsalis	.	.	.	-	-	-			
(f) Acute chorea	.	.	.	-	-	-			
(g) Other diseases (encephalitis)	.	.	.	-	2	2			
9. Alcoholic, total	.	.	.	.	.	.	15	6	21
(a) Pathological intoxication	.	.	.	-	1	1			
(b) Delerium tremens	.	.	.	1	-	1			
(c) Korsakow's psychosis	.	.	.	2	-	2			
(d) Acute hallucinosis	.	.	.	7	3	10			
(e) Chronic hallucinosis	.	.	.	2	1	3			
(f) Acute paranoid type	.	.	.	-	-	-			
(g) Chronic paranoid type	.	.	.	-	1	1			
(h) Alcoholistic deterioration	.	.	.	3	-	3			
(i) Other types, acute or chronic	.	.	.	-	-	-			
10. Due to drugs and other exogenous toxins, total	.	.	.	.	.	.	2	-	2
(a) Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined (to be specified)	.	.	.	2	-	2			
(b) Metals, as lead, arsenic, etc. (to be specified)	.	.	.	-	-	-			
(c) Gases (to be specified)	.	.	.	-	-	-			
(d) Other exogenous toxins (to be specified)	.	.	.	-	-	-			
11. With pellagra	.	.	.	.	.	.	-	-	-
12. With other somatic diseases, total	.	.	.	.	.	.	1	6	7
(a) Delirium with infectious diseases	.	.	.	-	-	-			
(b) Post-infectious psychoses	.	.	.	1	3	4			
(c) Exhaustion delirium	.	.	.	-	3	3			
(d) Delirium of unknown origin	.	.	.	-	-	-			
(e) Cardiorespiratory disease	.	.	.	-	-	-			
(f) Diseases of the ductless glands	.	.	.	-	-	-			
(g) Other diseases or conditions (to be specified)	.	.	.	-	-	-			
13. Manic-depressive, total	.	.	.	.	.	.	14	18	32
(a) Manic type	.	.	.	3	14	17			
(b) Depressive type	.	.	.	10	3	13			
(c) Stuporous type	.	.	.	-	-	-			
(d) Mixed type	.	.	.	1	1	2			
(e) Circular type	.	.	.	-	-	-			
(f) Other types	.	.	.	-	-	-			
14. Involution melancholia	.	.	.	.	.	.	14	14	28
15. Dementia praecox, total	.	.	.	61	25	86	97	44	141
(a) Paranoid type	.	.	.	-	-	-			
(b) Catatonic type	.	.	.	17	13	30			
(c) Hebephrenic type	.	.	.	10	2	12			
(d) Simple type	.	.	.	9	4	13			
(e) Other types	.	.	.	-	-	-			
16. Paranoia or paranoid conditions	.	.	.	.	.	.	-	-	-

TABLE 6.—*Psychoses of First Admissions*—Concluded.

	PSYCHOSES.	Males.	Females.	Totals.	Males.	Females.	Totals.
17.	Epileptic, total	.	.	.	2	2	4
(a)	Epileptic deterioration	.	.	.	2	2	4
(b)	Epileptic clouded states	.	.	.	-	-	-
(c)	Other epileptic types (to be specified)	.	.	.	-	-	-
18.	Psychoneuroses and neuroses, total	.	.	.	3	7	10
(a)	Hysterical type	.	.	.	4	4	8
(b)	Psychasthenic type	.	.	.	1	3	4
(c)	Neurasthenic type	.	.	.	1	2	3
(d)	Anxiety neuroses	.	.	.	-	-	-
(e)	Other types	.	.	.	-	-	-
19.	With psychopathic personality	.	.	.	2	-	2
20.	With mental deficiency	.	.	.	14	7	21
21.	Undiagnosed	.	.	.	22	14	36
22.	Without psychoses, total	.	.	.	4	2	6
(a)	Epilepsy	.	.	.	1	-	1
(b)	Alcoholism	.	.	.	-	-	-
(c)	Drug addiction	.	.	.	-	-	-
(d)	Psychopathic personality	.	.	.	3	1	4
(e)	Mental deficiency	.	.	.	-	1	1
(f)	Others	.	.	.	-	-	-
Totals		.	.	.	272	174	446

TABLE 7.—*Race of First Admissions classified with Reference to Psychoses.*

TABLE 7.—*Race of First Admissions classified with Reference to Psychoses—Concluded.*

TABLE 8.—*Age of First Admissions classified with Reference to Principal Psychoses.*

PSYCHOSES.	TOTAL.	YEARS.					
		UNDER 15.	15-20.	20-25.	25-30.	30-35.	35-40.
1. Traumatic							
2. Senile							
3. With cerebral arteriosclerosis							
4. General paralysis							
5. With cerebral syphilis							
6. With Huntington's chorea							
7. With brain tumor							
8. With other brain or nervous diseases							
9. Alcoholic							
10. Due to drugs and other exogenous toxins							
11. With pellagra							
12. With other somatic diseases							
13. Manic-depressive							
14. Involution melancholia							
15. Dementia praecox							
16. Paranoia or paranoid condition							
17. Epileptic							
18. Psychoneuroses and neuroses							
19. With psychopathic personality							
20. With mental deficiency							
21. Undiagnosed							
22. Without psychosis							
Totals	.	.	.	.	.	.	.
	272	174	446	2	-	2	13
	272	174	446	2	-	2	13
	28	19	47	32	13	37	39
	19	58	39	13	45	39	19
	58	24	40	16	40		

TABLE 8.—*Age of First Admissions classified with Reference to Principal Psychoses—Concluded.*

PSYCHOSES.	YEARS.						
	45-50.	50-55.	55-60.	60-65.	65-70.	70-75.	75-80.
1. Traumatic	-	-	-	-	-	-	-
2. Senile	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis	-	-	-	-	-	-	-
4. General paralysis	-	-	-	-	-	-	-
5. With cerebral syphilis	-	-	-	-	-	-	-
6. With Huntington's chorea	-	-	-	-	-	-	-
7. With brain tumor	-	-	-	-	-	-	-
8. With other brain or nervous diseases	-	-	-	-	-	-	-
9. Alcoholic	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-
12. With other somatic diseases	-	-	-	-	-	-	-
13. Manic-depressive	-	-	-	-	-	-	-
14. Involuntary melancholia	-	-	-	-	-	-	-
15. Dementia praecox	-	-	-	-	-	-	-
16. Paranoia or paranoid condition	-	-	-	-	-	-	-
17. Epileptic	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-
19. With psychopathic personality	-	-	-	-	-	-	-
20. With mental deficiency	-	-	-	-	-	-	-
21. Undiagnosed	-	-	-	-	-	-	-
22. Without psychosis	-	-	-	-	-	-	-
Totals	. . . . .	. . . . .	. . . . .	. . . . .	. . . . .	. . . . .	. . . . .
	19	22	41	15	13	28	20
	13	2	13	33	13	2	15
	10	12	22	10	12	22	8
	5	5	13	13	9	22	

TABLE 9.—*Degree of Education of First Admissions classified with Reference to Psychoses.*

PSYCHOSES.	TOTAL.		ILLITERATE.		READS AND WRITES.		COMMON SCHOOL.		HIGH SCHOOL.		COLLEGE.		UNASCIERTAINED.		
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	
1. Traumatic	15	27	1	1	1	1	10	11	21	—	—	—	4	10	14
2. Senile	31	15	46	27	1	1	8	15	12	27	—	—	8	1	9
3. With cerebral arteriosclerosis	—	—	—	—	6	6	6	19	12	25	—	—	2	3	—
4. General paralysis	—	—	—	—	—	—	1	4	2	6	1	1	—	—	—
5. With cerebral syphilis	6	1	1	1	—	—	—	—	1	1	—	—	—	—	—
6. With Huntington's chorea	—	—	—	—	—	—	—	—	2	2	—	—	—	—	—
7. With brain tumor	2	2	4	—	—	—	4	—	4	—	—	—	—	—	—
8. With other brain or nervous diseases	15	6	21	1	1	2	5	9	4	13	2	2	—	—	—
9. Alcohol	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra	1	6	7	—	1	1	1	1	1	3	4	—	—	1	3
12. With other somatic diseases	14	18	32	—	1	1	3	4	11	10	21	—	2	1	2
13. Manic-depressive	14	14	28	—	—	5	24	5	—	12	12	24	—	2	2
14. Involution melancholia	97	44	141	3	2	—	—	—	49	26	75	1	1	1	20
15. Dementia praecox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
16. Paranoia and paranoid condition	2	2	4	1	—	—	1	1	2	2	3	—	3	—	—
17. Epileptic	3	7	10	—	—	—	—	—	—	—	—	—	—	—	—
18. Psychoneuroses and neuroses	2	—	2	—	—	—	1	1	1	—	—	—	—	—	—
19. With psychopathic personality	14	7	21	1	2	3	3	4	8	4	12	1	1	1	1
20. With mental deficiency	22	14	36	1	2	3	4	2	6	12	18	1	2	1	3
21. Undiagnosed	4	2	6	—	1	—	1	3	1	4	—	—	—	1	6
22. Not insane	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	272	174	446	7	12	19	55	19	74	161	104	265	4	13	17
													2	3	5
													43	23	66

TABLE 10.—*Environment of First Admissions classified with Reference to Principal Psychoses.*

PSYCHOSES.	TOTAL.			URBAN.			RURAL.			UNASCERTAINED.		
	MALES.		FEMALES.	MALES.		FEMALES.	MALES.		FEMALES.	MALES.		FEMALES.
	MALES.	FEMALES.	TOTALS.	MALES.	FEMALES.	TOTALS.	MALES.	FEMALES.	TOTALS.	MALES.	FEMALES.	TOTALS.
1. Traumatic	—	—	—	15	27	42	1	24	—	5	3	8
2. Senile	—	—	—	31	15	46	10	34	40	6	1	7
3. With cerebral arteriosclerosis	—	—	—	27	7	34	7	33	1	—	—	—
4. General paralysis	—	—	—	6	2	8	6	2	8	—	—	—
5. With cerebral syphilis	—	—	—	—	1	1	—	1	1	—	—	—
6. With Huntington's chorea	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor	—	—	—	2	2	4	1	2	3	—	1	—
8. With other brain or nervous diseases	—	—	—	15	6	21	14	6	20	1	—	—
9. Alcoholic	—	—	—	2	—	2	2	—	2	—	—	—
10. Due to drugs and other exogenous toxins	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra	—	—	—	1	6	7	1	6	7	—	—	—
12. With other somatic diseases	—	—	—	18	32	52	14	16	30	—	2	2
13. Manic-depressive	—	—	—	14	14	28	14	11	25	—	3	3
14. Involution melancholia	—	—	—	97	44	141	87	43	130	9	1	10
15. Dementia praecox	—	—	—	—	—	—	—	—	—	—	—	1
16. Paranoia or paranoid condition	—	—	—	2	2	4	—	—	—	—	—	—
17. Epileptic	—	—	—	3	7	10	3	1	3	—	1	1
18. Psychoneuroses and neuroses	—	—	—	2	2	2	3	6	9	—	1	1
19. With psychopathic personality	—	—	—	14	7	21	13	6	19	—	1	1
20. With mental deficiency	—	—	—	22	14	36	20	14	34	2	—	2
21. Undiagnosed	—	—	—	4	2	6	4	2	6	—	—	—
22. Without psychosis	—	—	—	—	—	—	—	—	—	—	—	—
Totals	—	—	—	272	174	446	245	162	407	25	12	37
										2	—	2

TABLE II.—*Economic Condition of First Admissions classified with Reference to Principal Psychoses.*

TABLE 12.—Use of Alcohol by First Admissions classified with Reference to Principal Psychoses.

TABLE I3.—*Marital Condition of First Admissions classified with Reference to Principal Psychoses.*

TABLE 14.—*Psychoses of Readmissions.*

PSYCHOSES.	Males.	Females.	Totals.	Males.	Females.	Totals.
				Males.	Females.	Totals.
1. Traumatic, total	.	.	.	-	-	-
(a) Traumatic delirium	.	.	.	-	-	-
(b) Traumatic constitution	.	.	.	-	-	-
(c) Post-traumatic mental enfeeblement (dementia)	.	.	.	-	-	-
(d) Other types	.	.	.	-	-	-
2. Senile, total	.	.	.	2	3	5
(a) Simple deterioration	.	1	1	2	-	-
(b) Presbyophrenic type	.	1	1	1	-	-
(c) Delirious and confused types	.	-	-	-	-	-
(d) Depressed and agitated types	.	-	-	-	-	-
(e) Paranoid types	.	1	1	2	-	-
(f) Pre-senile type	.	-	-	-	-	-
(g) Other types	.	-	-	-	-	-
3. With cerebral arteriosclerosis	.	.	.	3	-	3
4. General paralysis	.	.	.	8	3	11
5. With cerebral syphilis	.	.	.	1	-	1
6. With Huntington's chorea	.	.	.	-	-	-
7. With brain tumor	.	.	.	-	-	-
8. With other brain or nervous diseases, total	.	.	.	-	-	-
9. Alcoholic, total	.	.	.	4	1	5
(a) Pathological intoxication	.	-	-	-	-	-
(b) Delirium tremens	.	-	-	-	-	-
(c) Korsakow's psychosis	.	-	-	-	-	-
(d) Acute hallucinosis	.	2	1	3	-	-
(e) Chronic hallucinosis	.	-	-	-	-	-
(f) Acute paranoid type	.	1	-	1	-	-
(g) Chronic paranoid type	.	-	-	-	-	-
(h) Alcoholic deterioration	.	1	-	1	-	-
(i) Other types, acute or chronic	.	-	-	-	-	-
10. Due to drugs and other exogenous toxins, total	.	.	.	-	-	-
(a) Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined (to be specified)	.	-	-	-	-	-
(b) Metals, as lead, arsenic, etc. (to be specified)	.	-	-	-	-	-
(c) Gases (to be specified)	.	-	-	-	-	-
(d) Other exogenous toxins (to be specified)	.	-	-	-	-	-
11. With pellagra	.	.	.	-	-	-
12. With other somatic diseases, total	.	.	.	-	-	-
(a) Delirium with infectious diseases	.	-	-	-	-	-
(b) Post-infectious psychosis	.	-	-	-	-	-
(c) Exhaustion delirium	.	-	-	-	-	-
(d) Delirium of unknown origin	.	-	-	-	-	-
(e) Cardiorespiratory disease	.	-	-	-	-	-
(f) Diseases of the ductless glands	.	-	-	-	-	-
(g) Other diseases or conditions (to be specified)	.	-	-	-	-	-
13. Manic-depressive, total	.	.	.	14	10	24
(a) Manic type	.	6	8	14	-	-
(b) Depressive type	.	7	2	9	-	-
(c) Stuporous type	.	-	-	-	-	-
(d) Mixed type	.	1	-	1	-	-
(e) Circular type	.	-	-	-	-	-
(f) Other types	.	-	-	-	-	-
14. Involution melancholia	.	.	.	1	2	3
15. Dementia praecox, total	.	.	.	33	16	49
(a) Paranoid type	.	16	10	26	-	-
(b) Catatonic type	.	7	3	10	-	-
(c) Hebephrenic type	.	6	3	9	-	-
(d) Senile type	.	4	-	4	-	-
(e) Other types	.	-	-	-	-	-
16. Paranoia or paranoid conditions	.	.	.	-	-	-
17. Epileptic, total	.	.	.	2	1	3
(a) Epileptic deterioration	.	1	-	1	-	-
(b) Epileptic clouded states	.	1	1	2	-	-
(c) Other epileptic types (to be specified)	.	-	-	-	-	-

TABLE 14.—*Psychoses of Readmissions*—Concluded.

	PSYCHOSES.	Males.	Females.	Totals,	Males.	Females.	Totals.
18. Psychoneuroses and neuroses, total	1	-	1
(a) Hysterical type		-	-	-			
(b) Psychasthenic type		1	1	1			
(c) Neurasthenic type		-	-	-			
(d) Anxiety neuroses		-	-	-			
(e) Other types		-	-	-			
19. With psychopathic personality		-	-	-	1	2	3
20. With mental deficiency		-	-	-	6	2	8
21. Undiagnosed		-	-	-	6	2	8
22. Without psychosis, total		-	-	-	2	1	3
(a) Epilepsy		-	-	-			
(b) Alcoholism		-	-	-			
(c) Drug addiction		1	-	1			
(d) Psychopathic personality		1	-	1			
(e) Mental deficiency		1	1	2			
(f) Others		-	-	-			
Totals		-	-	-	84	43	127

TABLE 15.—Discharges of Patients classified with Reference to Principal Psychoses, and Condition on Discharge.

PSYCHOSES.	TOTAL.		RECOVERED.		IMPROVED.		UNIMPROVED.		NOT INSANE.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
1. Traumatic	1	1	1	1	1	1	1	1	1	1
2. Senile	7	2	6	1	8	6	7	6	1	2
3. With cerebral arteriosclerosis	6	1	1	1	7	4	1	1	1	1
4. General paralysis	1	1	1	1	1	1	1	1	1	1
5. With cerebral syphilis	1	1	1	1	1	1	1	1	1	1
6. With Huntington's chorea	1	1	1	1	1	1	1	1	1	1
7. With brain tumor	1	1	1	1	1	1	1	1	1	1
8. With other brain or nervous diseases	14	3	17	1	3	4	11	1	2	2
9. Alcoholic	—	—	—	—	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins	1	1	1	1	1	1	1	1	1	1
11. With pellagra	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	—	—	4	4	4	4	4	4	2	2
13. Manic-depressive	18	21	39	15	17	32	2	3	5	1
14. Involution melancholia	4	9	13	3	5	8	1	3	4	1
15. Dementia praecox	65	31	96	—	—	—	56	30	86	9
16. Paranoia or paranoid condition	—	—	—	—	—	—	—	—	—	—
17. Epileptic	2	2	2	4	—	—	2	1	3	2
18. Psychoneuroses and neuroses	5	6	11	—	1	3	5	8	2	2
19. With psychopathic personality	3	3	6	—	1	1	3	3	6	6
20. With mental deficiency	8	1	9	—	1	1	6	5	2	2
21. Undiagnosed	7	5	12	—	—	—	5	10	2	2
22. Without psychosis	4	3	7	—	—	—	—	—	4	3
Totals	147	91	238	19	31	50	104	50	154	27

TABLE 16.—*Causes of Death of Patients classified with Reference to Principal Psychoses.*

TABLE 16.—*Causes of Death of Patients classified with Reference to Principal Psychoses—Continued.*

CAUSE OF DEATH.	TOTAL.	PSYCHOSES.									
		SENNILE.	CEREBRO-ARTERIO-SCLEROSIS.	GENERAL PARALYSIS.	WITH CELEBRAL SYPHILIS.	WITH HUNTINGTON'S OR NERVOUS DISEASES.	WITH OTHER BRAIN OR NERVOUS DISEASES.	ALCOHOLIC.	WITH OTHER SOMATIC DISEASES.	Males.	Females.
<i>Diseases of the Circulatory System.</i>											
Cardiovascular-renal disease	28	8	36	3	4	7	6	6	—	—	—
Arteriosclerosis	18	6	24	5	2	7	12	3	15	—	—
Cerebro arteriosclerosis	4	—	7	1	1	1	1	1	4	—	—
Acute vegetative endocarditis	3	—	—	—	—	—	—	—	—	—	—
Chronic endocarditis	1	—	1	—	—	—	—	—	—	—	—
Chronic myocarditis	—	—	—	—	—	—	—	—	—	—	—
Chronic valvular heart disease	1	9	10	—	3	3	—	—	—	—	—
Femoral thrombosis	—	—	2	1	—	—	—	—	—	—	—
<i>Diseases of the Respiratory System.</i>											
Hypostatic pneumonia	—	—	2	2	—	1	1	—	—	—	—
Broncho-pneumonia	—	—	9	20	2	3	3	4	—	—	—
Lobar pneumonia	—	—	12	14	—	7	7	—	—	—	—
Pulmonary thrombosis	—	—	1	1	—	—	—	—	—	—	—
Pulmonary tuberculosis	—	—	6	11	—	—	—	—	—	—	—
<i>Diseases of the Digestive System.</i>											
Acute enteritis	—	—	2	1	3	—	—	—	—	—	—
Chronic gastroenteritis	—	—	—	1	1	—	—	—	—	—	—
Chronic enterocolitis	—	—	—	1	1	—	—	—	—	—	—
Bacillary dysentery	—	—	1	1	—	—	—	—	—	—	—
Carcinoma of intestines	—	—	1	1	—	—	—	—	—	—	—
Carcinoma of pylorus	—	—	2	2	—	—	—	—	—	—	—
Carcinoma of stomach	—	—	1	1	—	—	—	—	—	—	—

TABLE 16.—*Causes of Death of Patients classified with Reference to Principal Psychoses—Concluded.*

CAUSE OF DEATH.	PSYCHOSES.					
	MANIC- DEPRESSIVE.	INVOLU- TION MEL- ANCHOLIA.	DEMENTIA PRECOX.	PARANOIA OR PARANOID CONDITION.	WITH PSYCHO- PATHIC PERSONALITY.	WITH MENTAL DE- FICIENCY.
Males.	Females.	Totals.	Males.	Females.	Totals.	
Influenza						
Multiple abdominal abscesses						
Arthritis deformans						
Gangrene of left leg						
Purpura hemorrhagica						
Pernicious anemia						
Sepicema following infection of left leg						
Exhaustion due to manic-depressive insanity	2	2				
Carcinoma of breast						
<i>Diseases of the Nervous System.</i>						
Encephalitis						
Epidemic encephalitis						
Cerebral hemorrhage						
General paralysis of the insane						
Cerebrospinal syphilis						
Tabes dorsalis						
Status epilepticus						
Tubercular meningitis						
<i>Diseases of the Circulatory System.</i>						
Cardiovascular-renal disease	3	1				
Arteriosclerosis						
Cerebro arteriosclerosis						

TABLE 17.—*Age of Patients at Time of Death classified with Reference to Principal Psychoses.*

Psychoses.	Total.	YEARS.						Totals.
		Under 15.	15-20.	20-25.	25-30.	30-35.	35-40.	
Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.
1. Traumatic	-	-	-	-	-	-	-	-
2. Semile	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis	-	-	-	-	-	-	-	-
4. General paralysis	-	-	-	-	-	-	-	-
5. With cerebral syphilis	-	-	-	-	-	-	-	-
6. With Huntington's chorea	-	-	-	-	-	-	-	-
7. With brain tumor	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	-	-	-	-	-	-	-	-
9. Alcoholic	-	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-
11. 1. With pellagra	-	-	-	-	-	-	-	-
2. With other somatic diseases	-	-	-	-	-	-	-	-
3. Manic-depressive	-	-	-	-	-	-	-	-
4. Involution melancholia	-	-	-	-	-	-	-	-
5. Dementia praecox	-	-	-	-	-	-	-	-
6. Paranoia or paranoid condition	-	-	-	-	-	-	-	-
7. Epileptic	-	-	-	-	-	-	-	-
8. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-
With psychopathic personality	-	-	-	-	-	-	-	-
9. With mental deficiency	-	-	-	-	-	-	-	-
10. Undiagnosed	-	-	-	-	-	-	-	-
11. Without psychosis	-	-	-	-	-	-	-	-
Totals	-	-	-	-	-	-	-	-
	137	103	240	-	-	-	-	-
	10	6	16	5	5	4	4	8
	3	12	10	9	3	4	1	1
	10	6	16	5	5	4	4	8

TABLE 17.—*Age of Patients at Time of Death classified with Reference to Principal Psychoses—Concluded.*

PSYCHOSSES.	YEARS.										Totals.
	45-50.	50-55.	55-60.	60-65.	65-70.	70-75.	75-80.	OVER 80.	Males.	Females.	
1. Traumatic	1	1	1
2. Senile	2	2	2
3. With cerebral arteriosclerosis	1	1	1
4. General paralysis	1	1	1
5. With cerebral syphilis	1	1	1
6. With Huntington's chorea	1	1	1
7. With brain tumor	1	1	1
8. With other brain or nervous diseases	1	1	1
9. Alcoholic	1	1	1
10. Due to drugs and other exogenous toxins	1	1	1
11. With pellagra	1	1	1
12. With other somatic diseases	1	1	1
13. Manic-depressive	1	1	1
14. Involution melancholia	1	1	1
15. Dementia praecox	1	1	1
16. Paranoia or paranoid condition	1	1	1
17. Epileptic	1	1	1
18. Psychoneuroses and neuroses	1	1	1
19. With psychopathic personality	1	1	1
20. With mental deficiency	1	1	1
21. Undiagnosed	1	1	1
22. Without psychosis	1	1	1
Totals	10	15	17
									14	8	22
									12	7	19
									11	9	20
									18	15	33
									10	14	30
									17	10	27

TABLE 18.—*Total Duration of Hospital Life of Patients dying in Hospital classified according to Psychoses.*

Psychoses.	Total.	MONTHS.						YEARS.												
		LESS THAN 1.			1-3.			4-7.			8-12.			1-2.			3-4.			
		Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	
1. Traumatic	-	-	-	-	15	29	44	-	-	-	5	2	7	-	1	2	3	2	1	-
2. Senile	-	-	-	-	36	14	50	10	2	12	9	6	15	3	5	8	3	2	6	
3. With cerebral arteriosclerosis	-	-	-	-	33	8	46	2	-	-	1	2	5	2	10	5	1	6	1	
4. General paralysis	-	-	-	-	2	1	3	-	-	-	-	-	-	-	-	-	-	-	-	
5. With cerebral syphilis	-	-	-	-	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	
6. With Huntington's chorea	-	-	-	-	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	
7. With brain tumor	-	-	-	-	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	
8. With other brain or nervous diseases	-	-	-	-	5	5	10	-	-	-	1	1	1	-	1	1	3	1	1	
9. Alcoholic	-	-	-	-	15	2	17	-	-	-	1	1	1	-	3	-	4	-	4	
10. Due to drugs and other exogenous toxins	-	-	-	-	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	
11. With pellagra	-	-	-	-	2	2	4	-	-	-	-	-	-	-	-	-	-	-	-	
12. With other somatic diseases	-	-	-	-	5	4	9	2	2	4	1	1	1	-	1	-	1	-	-	
13. Manic-depressive	-	-	-	-	1	4	5	-	-	-	-	-	-	-	2	2	-	3	6	
14. Involution melænholia	-	-	-	-	17	26	43	2	1	3	-	-	-	-	1	-	1	-	-	
15. Dementia praecox	-	-	-	-	1	1	2	-	-	-	-	-	-	-	2	-	1	-	2	
16. Paranoia or paranoid condition	-	-	-	-	3	1	3	-	-	-	1	1	1	-	1	-	1	-	-	
17. Epileptic	-	-	-	-	1	1	2	-	-	-	-	-	-	-	1	-	1	-	-	
18. Psycho-neuroses and neuroses	-	-	-	-	1	1	2	-	-	-	-	-	-	-	1	-	1	-	-	
19. With psychopathic personality	-	-	-	-	2	2	4	1	1	2	-	-	-	-	1	-	1	-	2	
20. With mental deficiency	-	-	-	-	1	4	5	-	-	-	1	1	1	-	1	-	1	-	2	
21. Undiagnosed	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
22. Without psychosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Totals	137	103	240	20	11	31	21	13	34	15	13	28	12	16	12	28

TABLE 18.—*Total Duration of Hospital Life of Patients dying in Hospital classified according to Psychoses—Concluded.*

PSYCHOSES.	YEARS.																			
	5-10.	10-15.	15-20.	20-25.	25-30.	30-35.	35-40.													
Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	
1. Traumatic																				
2. Senile																				
3. With cerebral arteriosclerosis																				
4. General paralysis																				
5. With cerebral syphilis																				
6. With Huntington's chorea																				
7. With brain tumor																				
8. With other brain or nervous diseases																				
9. Alcoholic																				
10. Due to drugs and other exogenous toxins																				
11. With pellagra																				
12. With other somatic diseases																				
13. Manic-depressive																				
14. Involution melancholia																				
15. Dementia praecox																				
16. Paranoia or paranoid condition																				
17. Epileptic																				
18. Psychoneuroses and neuroses																				
19. With psychopathic personality																				
20. With mental deficiency																				
21. Undiagno. ed																				
22. Without psychosis																				
Totals																				
	9	17	26	6	4	10	4	7	11	—	2	2	3	4	2	1	3	3	2	5

TABLE 19.—*Family-care Department.*

	Males.	Females.	Totals.
Remaining Sept. 30, 1920	-	25	25
Admitted within the year	-	10	10
Nominally returned from visit for discharge . . .	-	1	1
Whole number of cases within the year	-	36	36
Dismissed within the year	-	14	14
Returned to the institution	-	10	10
Discharged	-	-	-
Died	-	2	2
Visit	-	2	2
Escaped	-	-	-
Remaining Sept. 30, 1921	-	22	22
Supported by State	-	13	13
Private	-	5	5
Self-supporting	-	4	4
Number of different persons within the year . . .	-	31	31
Number of different persons admitted	-	6	6
Number of different persons dismissed	-	12	12
Daily average number	-	24.11	24.11
State	-	15.36	15.36
Private	-	4.75	4.75
Self-supporting	-	4.00	4.00

